EXHIBIT B

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2240

DATE 01/08/2018 TERMS Net 30

DUE DATE 02/07/2018

PURCHASE ORDER
2286-4645

ACTIVITY	QTY	RATE	AMOUNT
Magnetic Particle / Liquid Penetrant / Vacuum Box Examinations:2 Person Magnetic Particle Testing Crew ST @LaMarque, MT Report #14586, 1/5/2018	6	92.00	552.00
Consumables:MT Materials:Aerosol Cans	1	23.00	23.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $640.00

BLAZER INSPECTION

Nondestructive Testing
2602 Texas Avenue • Texas City, TX 77590
(409) 948-1012

Report 14586

Customer: Paragon	Texas
Job Reference: 2286-4645	Date of Test: 1-5-18
Scope of Examination: MT Exam	Witnessed by: crew
Specification: BI-MT-400-RevO	
	Job Location: Lamarque TT

MAGNETIC PARTICLE

☒ WET ☐ DRY ☒ AC ☐ DC

AMPERE TURNS — CIRCULAR AMPS 6 AMPS

YOKE Parker Contour S/N MT007

DEMAGNETIZED Yes

PENETRANT

☐ VISIBLE ☐ FLUORESCENT

PENETRANT _____ BATCH NO. _____ TIME _____

EMULSIFIER _____ BATCH NO. _____ TIME _____

DEVELOPER _____ BATCH NO. _____ TIME _____

ITEM	QUANTITY	DESCRIPTION	RESULTS OF INSPECTION
1	1	MT Root Pass on vessel W-2286-V-1	No Relevant Indications found @ time of Inspection

Clock Time from A.M. 10:00 TO P.M. 4:00

Travel Time — Work Time 6 Hr

Technician Jason Martin Level II

Assistant Dan B

Material: 1 can each

Mileage: —

CUSTOMER REPRESENTATIVE

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BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2281

DATE 01/22/2018 TERMS Net 30

DUE DATE 02/21/2018

PURCHASE ORDER
2293

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @Corpus Christi, RT Report #1382, 1/17/2018	5	92.00	460.00
Miscellaneous Charges:Mileage	260	1.00	260.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00
Radiographic Testing:2 Person Radiography Crew ST @Corpus Christi, RT Report #1381, 1/18/2018	8	92.00	736.00
Radiographic Testing:2 Person Radiography Crew OT	3	138.00	414.00
Radiographic Testing:Film:4.5x17 Inch Film	54	9.00	486.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00
Radiographic Testing:2 Person Radiography Crew ST @Corpus Christi, RT Report #1387, 1/19/2018	8	92.00	736.00
Radiographic Testing:2 Person Radiography Crew OT	3	138.00	414.00
Radiographic Testing:Film:4.5x17 Inch Film	38	9.00	342.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00
Radiographic Testing:2 Person Radiography Crew OT @Corpus Christi, RT Report #1388, 1/20/2018	5	138.00	690.00
Miscellaneous Charges:Mileage	260	1.00	260.00
Miscellaneous Charges:Discount Discount applied to reduce to agreed upon price	1	-1,093.00	-1,093.00

TOTAL DUE $4,000.00

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RADIOGRAPHIC EXAMINATION REPORT

Page ____ of ____

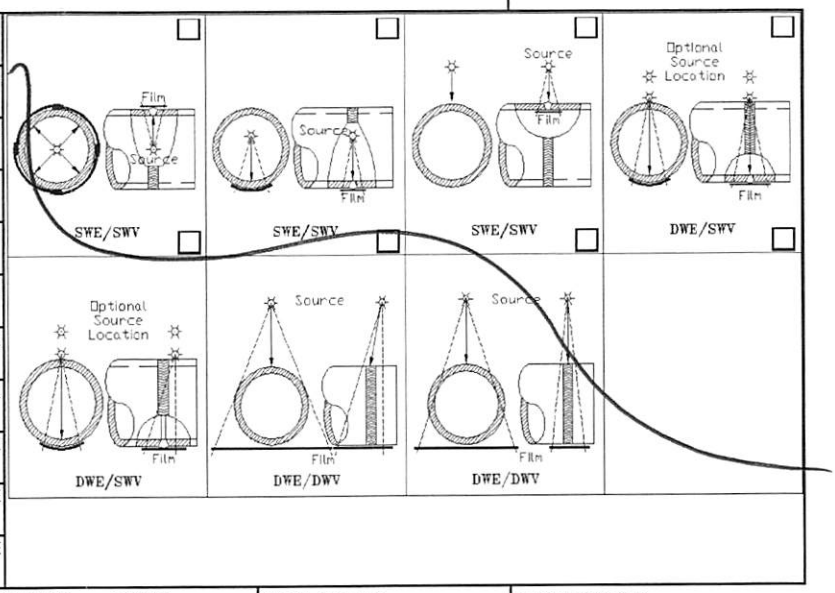
SC# ____

CUSTOMER/CONTACT Pasayon FAB | DATE 1-17-18

LOCATION/ADDRESS @ Corpus Christi

UNIT/SYSTEM @ Job 2293 | P.O.

	A	B	C	D	E
MATERIAL					
THICKNESS					
DIAMETER					
REINF. THICKNESS					
SFD					
EXPOSURE TIME					
IQI SIZE/MATERIAL					
IQI LOCATION (S/F)					
SHIM THK & MAT'L					
# OF EXPOSURES					
MARKERS: NBR OR SPACING					



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS FRONT / REAR	FILM LOADING	FILM PROCESS:
☐ Ir ☐ Co ☐ X-Ray						☐ Single ☐ Double	TIME / TEMP ☐ AUTO ☐ MANUAL

NDE PROCEDURE | ACCEPTANCE STANDARD | SURFACE CONDITION

STAGE OF MANUFACTURE ☐ INTERMEDIATE ☐ FINAL ☐ REPAIR ☐ BEFORE PWHT ☐ AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
				☐	☐		Drive time ticket only

☐ ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE 0 | FILM BRAND/TYPE 0 | TOTAL # OF WELDS 0

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
1-17-18	Jeremy	Yes ☐ No ☐	1382	11	2

Travel if Applicable		Airlines	Hours:					Total Hrs
Hours:	Miles Total: 260	Vehicle ☒	Worked	to 5 AM	and	to 10 PM		5

X Jeremy Dalley
Signature of Customer's Representative certifies time and material correct

Williamson, J
Name, Signature, and Level of Examiner

S. Volkel
Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

RT-BI-001

BLAZER INSPECTION, INC.
2602 Texas Avenue
Texas City, TX 77590
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Fax (409) 948-0839
www.blazerinspection.com

RADIOGRAPHIC EXAMINATION REPORT

Page ____ of ____

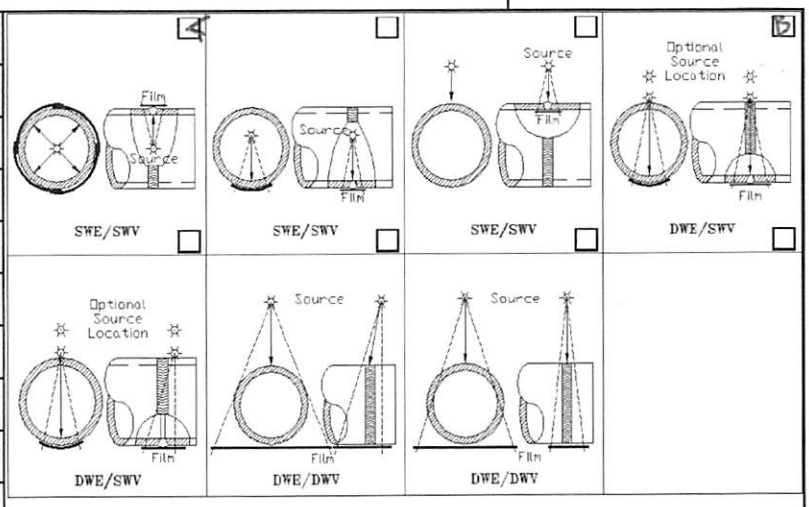
SC# ____

CUSTOMER/CONTACT Parasco FAB | DATE 1-18-18

LOCATION/ADDRESS C Maselle Corpus Christi

UNIT/SYSTEM JOB #2293 | P.O.

	A	B	C	D	E
MATERIAL	C/S	C/S			
THICKNESS	.375	.375			
DIAMETER	24"/12	12"/24			
REINF. THICKNESS	N/A	N/A			
SFD	12.5/9.5	Contact			
EXPOSURE TIME	2min WA	V4 Ways			
IQI SIZE/MATERIAL	B	B			
IQI LOCATION (S/F)	F	F			
SHIM THK & MAT'L	N/A	N/A			
# OF EXPOSURES	1	6/4			
MARKERS: NBR OR SPACING	1-2	1-2			



SOURCE: ☒ Ir ☐ Co ☐ X-Ray | Ci 70 | kV 70 | Ma | FOCAL SPOT .1X1.0 | SCREENS FRONT .005 REAR .005 Hxnlw | FILM LOADING ☒ Single ☐ Double | FILM PROCESS: TIME 4min TEMP 70° ☐ AUTO ☒ MANUAL

NDE PROCEDURE BI-300-RT-Rev 0 | ACCEPTANCE STANDARD API 1104 | SURFACE CONDITION Smooth / coated

STAGE OF MANUFACTURE: ☐ INTERMEDIATE ☒ FINAL ☐ REPAIR ☐ BEFORE PWHT ☐ AFTER PWHT

C - CRACK; SL - SLAG; T - TUNGSTEN; CP - CLUSTER POROSITY; P - POROSITY/GAS POCKET; HB - HOLLOW BEAD; IP - INSUFFICIENT PENETRATION; IF - INSUFFICIENT FUSION; EP - EXCESSIVE PENETRATION; EU - EXTERNAL UNDERCUT; IU - INTERNAL UNDERCUT; IC - INTERNAL CONCAVITY; SU - SURFACE; HL - IP DUE TO HIGH/LOW; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-3	1-2			☑	☐		-X-
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☑	☐	LOW SPOT ON CAP	
W-5	1-2			☑	☐		
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☑	☐		
W-6	1-2			☐	☐		
	2-3			☐	☐	SLAG .230 WIC	
	3-4			☐	☐		

☐ ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE 4.5X17 / 54 | FILM BRAND/TYPE AGFA D-3 | TOTAL # OF WELDS 16

Date 1-18-18 | Customer Contact Jeremy | Per Diem Yes ☑ No ☐ | Report # 1381 | Unit # 11 | No. on Job 2

Travel if Applicable Hours: N/A Miles Total: 40 | Airlines ☐ Vehicle ☒ | Hours: Worked to 6 AM and to 5 PM | Total Hrs 11

Jeremy Lindley — Signature of Customer's Representative certifies time and material correct

Name, Signature, and Level of Examiner — S. Voe Mel — Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

RT-BI-001

1381
- ~~1134~~

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READER SHEET

Page 2 of 3

SC#

CUSTOMER/CONTACT Parason Fab | DATE 1-18-18

LOCATION/ADDRESS @ Corpus Christi

UNIT/SYSTEM JOB 2293 | P.O.

C - CRACK, SL - SLAG, T - TUNGSTEN, CP - CLUSTER POROSITY, P - POROSITY/GAS POCKET, HB - HOLLOW BEAD, IP - INSUFFICIENT PENETRATION, IF - INSUFFICIENT FUSION, EP - EXCESSIVE PENETRATION, EU - EXTERNAL UNDERCUT, IU - INTERNAL UNDERCUT, IC - INTERNAL CONCAVITY, SU - SURFACE, HL - IP DUE TO HIGH/LOW, BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
w-6	4-5			☑	☐		X
	5-6			☑	☐		
	6-1			☑	☐	SLAG 5/8 wic	
w-7	1-2			☑	☐		
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☐	☒	cluster	
w-8	1-2			☑	☐		
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☑	☐		
w-9	1-2			☑	☐		
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☑	☐		
w-10	1-2			☑	☐		
	2-3			☑	☐		
	3-4			☑	☐	Por wic	
	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☑	☐		
w-19	1-2			☑	☐		-X-
	2-3			☑	☐		
	3-4			☑	☐		
	4-1			☑	☐		
w-20	1-2			☑	☐		E
	2-3			☑	☐		
	3-4			☑	☐		
	4-1			☑	☐		
w-21	1-2			☑	☐		
	2-3			☑	☐		
	3-4			☑	☐		
	4-1			☑	☐		

X _____ Signature of Customer's Representative certifies time and material correct

Williamson, T _____ Name, Signature, and Level of Examiner

S. Voelkel Assistant

Customer signature indicates satisfactory performance and agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file.

1381
- ~~1435~~

2602 Texas Avenue
Texas City TX 77590
Office (409) 948-1012
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READER SHEET

Page 3 of 3

SC#

CUSTOMER/CONTACT Paragon FIAB | DATE 1-18-18

LOCATION/ADDRESS @ Corpus Christi

UNIT/SYSTEM Job 2293 | P.O.

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
w-23	1-2			☑	☐		-X-
	2-3			☑	☐		
	3-1			☑	☐		
w-27	1-2			☑	☐		
	2-3			☑	☐		
	3-1			☑	☐		
w-28	1-2			☑	☐		E
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-1			☑	☐		
w-29	1-2			☑	☐	Por .123	
	2-3			☑	☐	cluster WIC	
	3-4			☑	☐		
	4-5			☑	☐		
	5-1			☑	☐		
w-38	1-2			☑	☐		
	2-3			☑	☐		
	3-1			☑	☐		
w-39	1-2			☑	☐		
	2-3			☑	☐		
	3-1			☑	☐		
				☐	☐		
				☐	☐		
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				☐	☐		
				☐	☐		

X _____ | Williamson IS | S. Voelkel

Signature of Customer's Representative certifies time and material correct | Name, Signature, and Level of Examiner | Assistant

Customer signature indicates satisfactory performance and agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file.

BLAZER INSPECTION, INC
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RADIOGRAPHIC EXAMINATION REPORT

Page ____ of ____

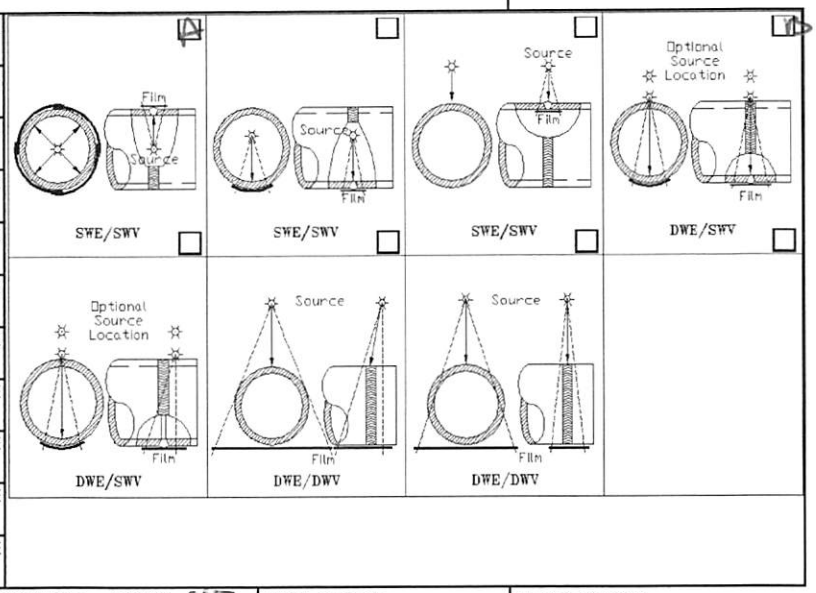
SC# ____

CUSTOMER/CONTACT PARSONS FAB | DATE 1-19-18

LOCATION/ADDRESS C corpus christi

UNIT/SYSTEM JOB 2293 | P.O.

	A	B	C	D	E
MATERIAL	C/S	C/S			
THICKNESS	.375	.375			
DIAMETER	24/18	24/18			
REINF. THICKNESS	N/A	N/A			
SFD	9.5/11.5	Correct			
EXPOSURE TIME	4MIN	VARIED			
IQI SIZE/MATERIAL	B	B			
IQI LOCATION (S/F)	F	F			
SHIM THK & MAT'L	N/A	N/A			
# OF EXPOSURES	1	1			
MARKERS: NBR OR SPACING	1-2	1-2			



SOURCE	Ci	KV	Ma	FOCAL SPOT	SCREENS	FILM LOADING	FILM PROCESS:
☒ Ir	70	70		.1X.10	FRONT .005 Hexagon REAR .005	☒ Single ☐ Double	TIME 5MIN
☐ Co							TEMP 74°
☐ X-Ray							☐ AUTO ☒ MANUAL

NDE PROCEDURE: BI-RT300-Rev 0 | ACCEPTANCE STANDARD: API ~~650~~ 1104 | SURFACE CONDITION: COATED/SMOOTH

STAGE OF MANUFACTURE: ☐ INTERMEDIATE ☒ FINAL ☐ REPAIR ☐ BEFORE PWHT ☐ AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-2	1-2			☑	☐	indication on less than ¼"	
	2-3			☑	☐	weld not darker than Base Metal	
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☑	☐		
W-4	1-2			☒	☐	L.O.F.	
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☒	L.O.F	
	6-1			☑	☒	L.O.F	
W-11	1-2			☑	☐		E
	2-3			☑	☐		{
	3-4			☑	☐		

☐ ADDITIONAL PAGES COMMENTS:

# OF FILM AND SIZE	FILM BRAND/TYPE	TOTAL # OF WELDS
4.5X17	AGFA/D-3	

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
1-19-18	Jeremy	Yes ☑ No ☐	1387	11	2

Travel if Applicable		Airlines	Hours:						Total Hrs
Hours:	Miles Total: 90	Vehicle ☒	Worked	to	6 AM	and	to	5 PM	11

Jeremy Hawkins — Signature of Customer's Representative certifies time and material correct

S. Volkel — Name, Signature, and Level of Examiner — Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

1387
- ~~1136~~

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Texas City TX 77590
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READER SHEET

Page 2 of

SC#

CUSTOMER/CONTACT Paragon FABS | DATE 1-19-18

LOCATION/ADDRESS @ Corpus Christi

UNIT/SYSTEM Job 2293 | P.O.

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-11	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☑	☐		
W-12	1-2			☑	☐		
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐	Por in code	
	5-6			☑	☐		
	6-1			☑	☐		
W-30	1-2			☑	☐		
	2-3			☑	☐		
	3-4			☑	☐	for in-code	
	4-5			☑	☐		
	5-1			☑	☐		
W-44	1-2			☑	☐		
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐	-SLAG- in-code	
	6-1			☑	☐		
W-57	1-2			☐	☒	Linear Indication (L.O.F.)	
	2-3			☑	☐		
	3-1			☑	☐		
				☐	☐		
				☐	☐		
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				☐	☐		

Signature of Customer's Representative certifies time and material correct

Williams

Name, Signature, and Level of Examiner

S Volkel

Assistant

Customer signature indicates satisfactory performance and agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file.

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Fax (409) 948-0839
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RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 1

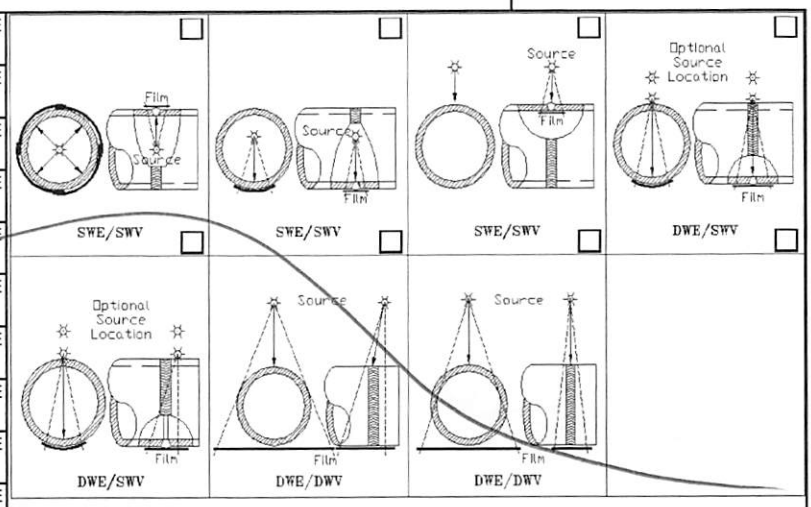
SC# _____

CUSTOMER/CONTACT PARSON FAB | DATE 1-2018

LOCATION/ADDRESS C Corpus Christi

UNIT/SYSTEM | P.O.

	A	B	C	D	E
MATERIAL					
THICKNESS					
DIAMETER					
REINF. THICKNESS					
SFD					
EXPOSURE TIME					
IQI SIZE/MATERIAL					
IQI LOCATION (S/F)					
SHIM THK & MAT'L					
# OF EXPOSURES					
MARKERS: NBR OR SPACING					



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS FRONT / REAR	FILM LOADING	FILM PROCESS:
☐ Ir ☐ Co ☐ X-Ray						☐ Single ☐ Double	TIME TEMP ☐ AUTO ☐ MANUAL

NDE PROCEDURE | ACCEPTANCE STANDARD | SURFACE CONDITION

STAGE OF MANUFACTURE ☐ INTERMEDIATE ☐ FINAL ☐ REPAIR ☐ BEFORE PWHT ☐ AFTER PWHT

C - CRACK	CP - CLUSTER POROSITY	IP - INSUFFICIENT PENETRATION	EU - EXTERNAL UNDERCUT	SU - SURFACE
SL - SLAG	P - POROSITY/GAS POCKET	IF - INSUFFICIENT FUSION	IU - INTERNAL UNDERCUT	HL - IP DUE TO HIGH/LOW
T - TUNGSTEN	HB - HOLLOW BEAD	EP - EXCESSIVE PENETRATION	IC - INTERNAL CONCAVITY	BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
				☐	☐		Drive Time
				☐	☐		home only
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
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				☐	☐		
				☐	☐		
				☐	☐		

☐ ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE | FILM BRAND/TYPE | TOTAL # OF WELDS

Date	Customer Contact	Per Diem Yes ☐ No ☐	Report #	Unit #	No. on Job

Travel if Applicable Hours: Miles Total: 260 | Airlines ☐ Vehicle ☐ | Hours: Worked to 6 AM and to 11 PM | Total Hrs 5

X Jeremy Hadley — Signature of Customer's Representative certifies time and material correct

Name, Signature, and Level of Examiner — S. Wolkel — Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

RT-BI-001

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2315

DATE 01/24/2018 **TERMS** Net 30

DUE DATE 02/23/2018

PURCHASE ORDER
2293-4658

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @LaMarque, RT Report #10-1232018, 1/23/2018	8	92.00	736.00
Radiographic Testing:2 Person Radiography Crew OT	2	138.00	276.00
Radiographic Testing:Film:4.5x17 Inch Film	43	9.00	387.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE **$1,514.00**

BLAZER INSPECTION, INC
2602 Texas Avenue
Texas City, TX 77590
Office (409) 948-1012
Fax (409) 948-0839
www.blazerinspection.com

10-1232018

RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 2

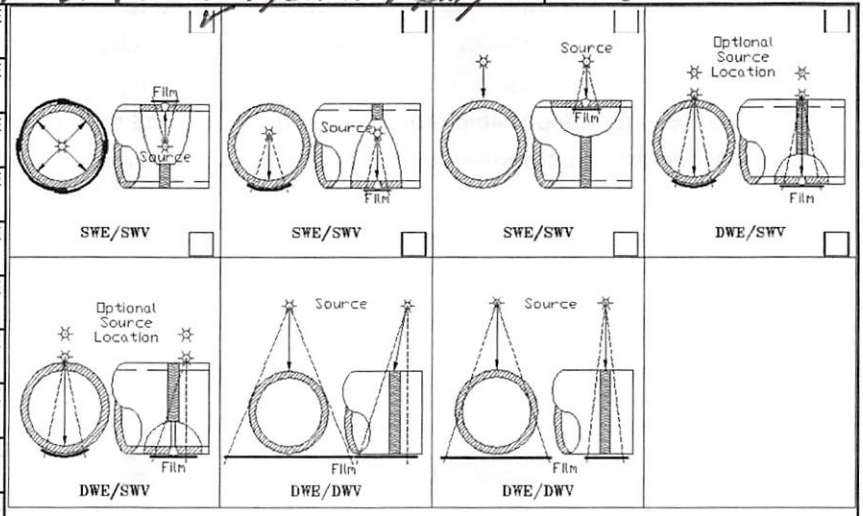
SC#

CUSTOMER/CONTACT Paragon | DATE 1/23/18

LOCATION/ADDRESS La Marque, Tx. TK#138 & #139

UNIT/SYSTEM J/W# 2293 / Corval Magellan Piping | P.O. 2293-4658

	A	B	C	D	E
MATERIAL	CS				
THICKNESS	.375				
DIAMETER	24				
REINF. THICKNESS	.125				
SFD	11 1/2				
EXPOSURE TIME	1:50				
IQI SIZE/MATERIAL	B				
IQI LOCATION (S/F)	F				
SHIM THK & MAT'L	.375				
# OF EXPOSURES	2				
MARKERS: NBR OR SPACING	12.5				



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS	FILM LOADING	FILM PROCESS:
☑ Ir	50			.10x.11	FRONT .010	☑ Single ☐ Double	TIME 5 min
☐ Co					REAR .010		TEMP 75
☐ X-Ray							☐ AUTO ☑ MANUAL

NDE PROCEDURE: RT-300 | ACCEPTANCE STANDARD: API 1104 | SURFACE CONDITION: Smooth

STAGE OF MANUFACTURE: ☐ INTERMEDIATE ☑ FINAL ☐ REPAIR ☐ BEFORE PWHT ☐ AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W#60	1-2	2 to 4		☑	☐		"X"
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☑	☐		
W#73	1-2			☑	☐		
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☑	☐		
W#74	1-2			☑	☐		
	2-3			☑	☐		
	3-4			☑	☐		

☑ ADDITIONAL PAGES COMMENTS: Page #2

OF FILM AND SIZE: (43) - 4.5"x17" | FILM BRAND/TYPE: Agfa - D3 | TOTAL # OF WELDS: 7

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
1/23/18	Jeremy	Yes ☐ No ☑	10-1232018	10	2

Travel if Applicable: Hours: N/A Miles Total: N/A | Airlines ☐ Vehicle ☑ | Hours: Worked to 9 AM and to 7 PM | Total Hrs 10

Signature of Customer's Representative certifies time and material correct

Mark DeVore II — Name, Signature, and Level of Examiner

Cory DeVore — Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

RT-BI-001

Acknowledgement:

The test results reported herein by the inspection technician are valid at the time of inspection only. Blazer Inspection, Inc. is not responsible for any changes in the state of the equipment after the inspection is completed including but not limited to: final installation practices, mechanical controls, operations or utilization parameters, or any other change in the state of the equipment from its state at the time of the inspection; and, makes no assertion, finding, representation, guarantee or warranty concerning the possible effects upon the inspected equipment from such changes, or the state of such inspected equipment at any time after the inspection is completed.

BLAZER INSPECTION, INC.
2602 Texas Avenue
Texas City TX 77590
Office (409) 948-1012
Fax (409) 948-0839
www.blazerinspection.com

10-1232018

READER SHEET

Page 2 of 2

SC# _____

CUSTOMER/CONTACT Paragon | DATE 1/23/18

LOCATION/ADDRESS LaMarque, Tx TK#138 & #139

UNIT/SYSTEM J/W# 2293 / Coral Magellan Piping | P.O. 2293-4658

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W# 74 cont.	4-5	2 to 4		☑	☐		"X"
	5-6			☑	☐		
	6-1			☑	☐		
W# 61	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☑	☐		
W# 59	1-2			☑	☐		"X"
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☑	☐		
W# 43	1-2			☑	☐		"X"
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☑	☐		
W# 72	1-2			☑	☐		"X"
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-1	✓	✓	☑	☐		
				☐	☐		
				☐	☐		
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				☐	☐		

Signature of Customer's Representative certifies time and material correct

Mark DeVine II / Cory DeVine
Name, Signature, and Level of Examiner / Assistant

Customer signature indicates satisfactory performance and agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file.

Acknowledgement:

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Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2316

DATE 01/25/2018 TERMS Net 30

DUE DATE 02/24/2018

PURCHASE ORDER
2293-4658

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @Paragon, RT Report #10-1242018-1 & 10-1242018-2, 1/24/2018	8	92.00	736.00
Radiographic Testing:2 Person Radiography Crew OT	4	138.00	552.00
Radiographic Testing:Film:4.5x17 Inch Film	47	9.00	423.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $1,826.00

BLAZER INSPECTION, INC.
2602 Texas Avenue
Texas City, TX 77590
Office (409) 948-1012
Fax (409) 948-0839
www.blazerinspection.com

10-1242018-1

RADIOGRAPHIC EXAMINATION REPORT

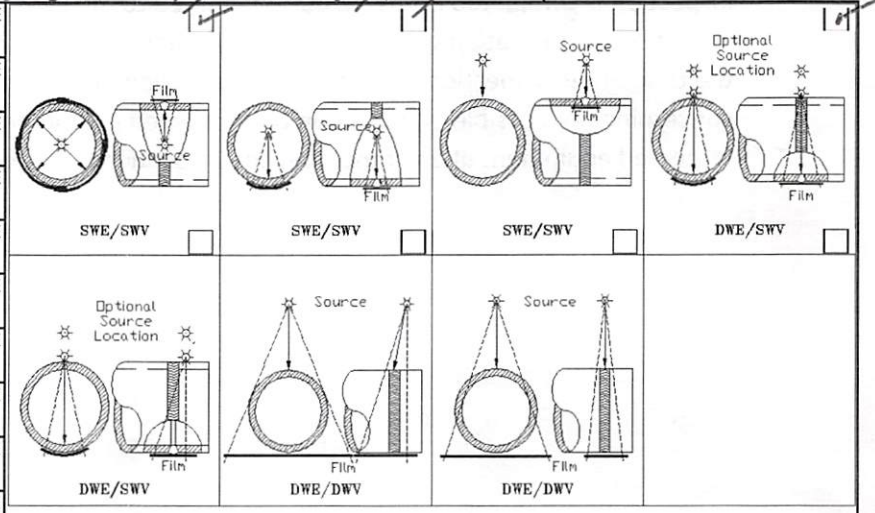
SC# _____

CUSTOMER/CONTACT Paragon | DATE 1/24/18

LOCATION/ADDRESS La Marque, Tx. Tank# 138 & #139

UNIT/SYSTEM S/W # 2293 - Corval Magellan Piping | P.O. 2293-4658

	A	B	C	D	E
MATERIAL	CS	CS	CS	CS	
THICKNESS	.375	.375	.375	.375	
DIAMETER	30	18	10.7	8.6	
REINF. THICKNESS	.125	.125	.125	.125	
SFD	14½	8½	10.7	8.6	
EXPOSURE TIME	2½	1'15	2	1½	
IQI SIZE/MATERIAL	B	B	B	B	
IQI LOCATION (S/F)	F	F	F	F	
SHIM THK & MAT'L	.375	.375	.375	.375	
# OF EXPOSURES	2	2	3	3	
MARKERS: NBR OR SPACING	13.4	11.3	11.2	9	



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS	FRONT	FILM LOADING	FILM PROCESS:
[4] Ir	50			.10x.11	.010	REAR .010	[4] Single [ ] Double	TIME 6min
[ ] Co	NDE PROCEDURE			ACCEPTANCE STANDARD			SURFACE CONDITION	TEMP 72
[ ] X-Ray	RT-300			API 1104			Smooth	[ ] AUTO [4] MANUAL

STAGE OF MANUFACTURE [ ] INTERMEDIATE [4] FINAL [ ] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W#24	1-2	2 to 4		✓			"X"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-6			✓			
	6-7			✓			
	7-1			✓			
W#78	1-2			✓			"X"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-1			✓			
W#605	1-2			✓			"X"
	2-3			✓			
	3-4			✓			

[4] ADDITIONAL PAGES COMMENTS: #2

OF FILM AND SIZE (47) - 4.5"x17" | FILM BRAND/TYPE Agfa - D3 | TOTAL # OF WELDS 12

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
1/24/18	Jeremy	Yes [ ] No [4]	10-1242018-1	10	2

Travel if Applicable Hours: N/A Miles Total: N/A | Airlines [ ] Vehicle [4] | Hours: Worked to 6 (AM) and to 6 (PM) | Total Hrs 12

Signature of Customer's Representative certifies time and material correct

Mark DeVine II / Cory DeVine
Name, Signature, and Level of Examiner / Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

Acknowledgement:

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Texas City TX 77590
Office (409) 948-1012
Fax (409) 948-0839
www.blazerinspection.com

10-1242018-2

READER SHEET

Page 2 of 2

SC# _____

CUSTOMER/CONTACT Paragon | DATE 1/24/18

LOCATION/ADDRESS LaMarque, Tx. TK# 138 - #139

UNIT/SYSTEM J/W# 2293 - Corval Magellan Piping | P.O. 2293-4658

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W#65 cont.	4-5	2 to 4		☑	☐		"X"
↓	5-1	↓	↓	☑	☐		↓
W#50	1-2			☑	☐		"X"
↓	2-3			☑	☐		↓
↓	3-4			☑	☐		↓
↓	4-5			☑	☐		↓
↓	5-1			☑	☐		↓
W#40	1-2			☑	☐	P- smaller than 1/8"	"X"
↓	2-3			☑	☐		↓
↓	3-1			☑	☐		↓
W#41	1-2			☑	☐		↓
↓	2-3			☑	☐		↓
↓	3-1			☑	☐		↓
W#42	1-2			☑	☐		↓
↓	2-3			☑	☐		↓
↓	3-1			☑	☐		↓
W#58	1-2			☑	☐		"E"
↓	2-3			☑	☐		↓
↓	3-1			☑	☐		↓
W#95	1-2			☑	☐		"X"
↓	2-3			☑	☐		↓
↓	3-1			☑	☐		↓
W#96	1-2			☑	☐	Cluster P- smaller than 1/2" + 1/8"	↓
↓	2-3			☑	☐		↓
↓	3-1			☑	☐		↓
W#94	1-2			☑	☐		"X"
↓	2-3			☑	☐	P- smaller than 1/8"	↓
↓	3-1			☑	☐		↓
W#101	1-2			☑	☐		"E"
↓	2-3			☑	☐		↓
↓	3-1	↓	↓	☑	☐		↓
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		

Signature of Customer's Representative certifies time and material correct

Mark DeVine II / Cory DeVine
Name, Signature, and Level of Examiner — Assistant

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Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2317

DATE 01/25/2018 TERMS Net 30

DUE DATE 02/24/2018

PURCHASE ORDER
2293-4658

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @LaMarque, RT Report #10-1252018-1 & 10-1252018-2, 1/25/2018	8	92.00	736.00
Radiographic Testing:2 Person Radiography Crew OT	4	138.00	552.00
Radiographic Testing:Film:4.5x17 Inch Film	45	9.00	405.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $1,808.00

2602 Texas Avenue
Texas City, TX 77590
Office (409) 948-1012
Fax (409) 948-0839
www.blazerinspection.com

10-1252018-1

RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 2

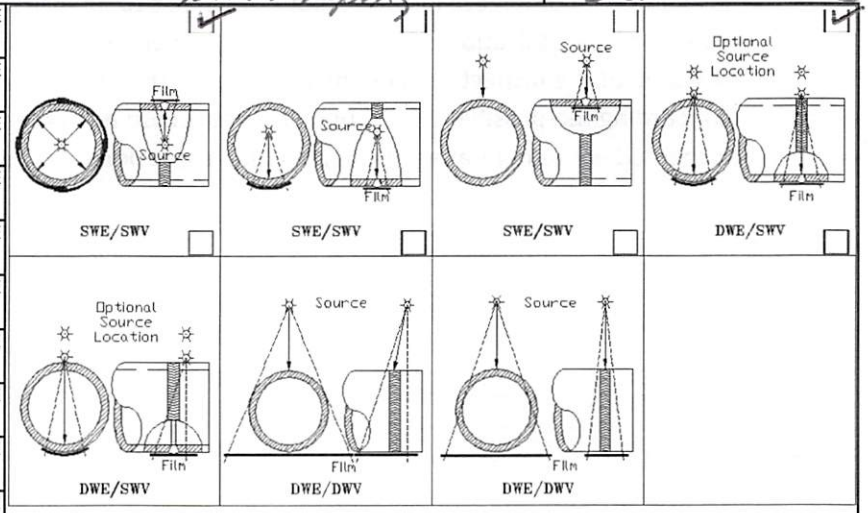
SC#

CUSTOMER/CONTACT Paragon — DATE 1/25/18

LOCATION/ADDRESS La Marque, Tx. — Tk# 138 & # 139

UNIT/SYSTEM J/N# 2293 - Corval Magellan Piping — P.O. 2293-4658

	A	B	C	D	E
MATERIAL	CS	CS	CS		
THICKNESS	.375	.375	.375		
DIAMETER	18	16	20		
REINF. THICKNESS	.125	.125	.125		
SFD	8 3/4	7 1/2	9 1/2		
EXPOSURE TIME	2	1 1/2	2 1/2		
IQI SIZE/MATERIAL	B	B	B		
IQI LOCATION (S/F)	F	F	F		
SHIM THK & MAT'L	.375	.375	.375		
# OF EXPOSURES	2	2	2		
MARKERS: NBR OR SPACING	11.3	12.5	12.5		



SOURCE: [x] Ir [ ] Co [ ] X-Ray — Ci: 50 — kV — Ma — FOCAL SPOT: .10x.11 — SCREENS: FRONT .010, REAR .010 — FILM LOADING: [x] Single [ ] Double — FILM PROCESS: TIME 7 5 — TEMP 6 min — [ ] AUTO [x] MANUAL

NDE PROCEDURE: RT-300 — ACCEPTANCE STANDARD: API 1104 — SURFACE CONDITION: Smooth

STAGE OF MANUFACTURE: [ ] INTERMEDIATE [x] FINAL [ ] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W#47	1-2	2 to 4		✓			"X"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-1			✓			
W#48	1-2			✓			"X"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-1			✓			
W#49	1-2			✓			"X"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-1			✓			

[x] ADDITIONAL PAGES — COMMENTS: page #2

OF FILM AND SIZE: (45) - 4.5" x 17" — FILM BRAND/TYPE: Agfa D3 — TOTAL # OF WELDS: 9

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
1/25/18	Jeremy	Yes [ ] No [x]	10-1252018-1	10	2

Travel if Applicable — Hours: N/A — Miles Total: N/A — Airlines [ ] — Vehicle [x]

Hours: Worked — to 6 AM and to 6 PM — Total Hrs 12

Signature of Customer's Representative certifies time and material correct

Mark DeVine II / Cory DeVine

Name, Signature, and Level of Examiner / Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

Acknowledgement:

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BLAZER INSPECTION, INC.
2602 Texas Avenue
Texas City TX 77590
Office (409) 948-1012
Fax (409) 948-0839
www.blazerinspection.com

10-125 2018-2

READER SHEET

Page 2 of 2

SC#

CUSTOMER/CONTACT Paragon — DATE 1/25/18

LOCATION/ADDRESS La Marque, Tx. TK# 138 & #139

UNIT/SYSTEM J/N#2293 - Corval Magellan Piping — P.O. 2293-4658

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W#70	1-2	2 to 4		☑	☐		"E"
	2-3			☑	☐		
	3-4			☑	☐		
	4-1			☑	☐		
W#83	1-2			☐	☒	CP	"E"
	2-3			☐	☒	CP	
	3-4			☑	☐		
	4-1			☑	☐		
W#71	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-1			☑	☐		
W#84	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-1			☑	☐		
W#85	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-1			☑	☐		
W#93	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-1	✓	✓	☑	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		

Jeremy Hollon
Signature of Customer's Representative certifies time and material correct

Mark DeVine II / Cory DeVine
Name, Signature, and Level of Examiner / Assistant

Customer signature indicates satisfactory performance and agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file.

Acknowledgement:

The test results reported herein by the inspection technician are valid at the time of inspection only. Blazer Inspection, Inc. is not responsible for any changes in the state of the equipment after the inspection is completed including but not limited to: final installation practices, mechanical controls, operations or utilization parameters, or any other change in the state of the equipment from its state at the time of the inspection; and, makes no assertion, finding, representation, guarantee or warranty concerning the possible effects upon the inspected equipment from such changes, or the state of such inspected equipment at any time after the inspection is completed.

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2329

DATE 01/30/2018 TERMS Net 30

DUE DATE 03/01/2018

PURCHASE ORDER
2286-466

ACTIVITY	QTY	RATE	AMOUNT
Ultrasonic Testing:Flaw Detection:2 Person UT Shear Wave Crew ST	8	132.50	1,060.00
Ultrasonic Testing:Flaw Detection:UT Shear Wave Equipment	1	250.00	250.00
Consumables:UT Materials:Ultragel Tube Tube	1	10.00	10.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $1,385.00

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Texas City, TX 77590 Office
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ULTRASONIC EXAMINATION REPORT

Page 1 of 1

SC# 1292018-1, 2

CUSTOMER/CONTACT Paragon | DATE 1-29-2018

LOCATION/ADDRESS Texas stress INC

UNIT/SYSTEM | P.O. 2286466

ITEM DESCRIPTION Spherica Vessel (Nozzles)

MATERIAL	SIZE	QUANTITY	THICKNESS	SURFACE CONDITION
C/S	(2) 48"±D x 3 1/2"	2	3.500	smooth

PROCEDURE BI-UT-500 Rev. 0 | ACCEPTANCE STANDARD ASME Sec VIII Div. 1 | ITEM TEMP 80° | CAL BLOCK TEMP 80°

STAGE OF MANUFACTURE: ☐ INITIAL ☐ REPAIR ☑ FINAL | COMMENTS: | SURFACE PREPARATION smooth

☐ LONGITUDINAL ☐ OTHER ☑ SHEAR WAVE | TYPE OF EXAM UTSW | COUPLANT Ultragel II

INSTRUMENT
MFG: Panametrics
MODEL: Epoch XT
S/N: 070129609

TRANSDUCER
MFG: Technisonic
MODEL: ABFQ-0502 CMP
S/N: 79046
FREQ: 5.0
SIZE: .25
ELEMENT: ☐ SINGLE ☑ DUAL
WEDGE ANGLE: 70/60/45
MEAS. ANGLE: 70/60/45
DELAY: 0

CALIBRATION BLOCK: ☑ FLAT ☐ CURVED | TYPE IIW II ASME OD/ID | MATERIAL C/S | MFG 3E | S/N 3E/BCB/CS/3/4"/E15

COMMENTS | INCLUDE ACCEPT/REJECT | ☐ SKETCH ☐ ADDITIONAL PAGES

Part #
51017448 Nozzle 3"
51018486 Nozzle 4

No Rejectable Indications at the time of inspection.

SENSITIVITY LEVEL	CAL TIME	INITIAL	INTERM	INTERM	FINAL
		5:00			

CONSUMABLES: COUPLANT GAL | TUBE | ☐ HIGH TEMP.

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
1-29-2018	Paragon	Yes ☐ No ☑			

Travel if Applicable Hours: | Miles Total | Airlines ☐ Vehicle ☐ | Hours: Worked to 9:00 AM and to 5:00 PM | Total Hours 8

Brandon Barnett
Signature of Customer's Representative certifies time and material correct

Jeffy Foglin Level II
Name, Signature, and Level of Examiner | Assistant

Customer signature indicates satisfactory performance & agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file

UT-BI-001

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
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BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2353

DATE 02/01/2018 TERMS Net 30

DUE DATE 03/03/2018

PURCHASE ORDER
2293-4671

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @LaMarque, RT Report #1280, 1/31/2018	8	92.00	736.00
Radiographic Testing:2 Person Radiography Crew OT	6	138.00	828.00
Radiographic Testing:Film:4.5x17 Inch Film	45	9.00	405.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $2,084.00

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Texas City, TX 77590
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Fax (409) 948-0839
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RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 3

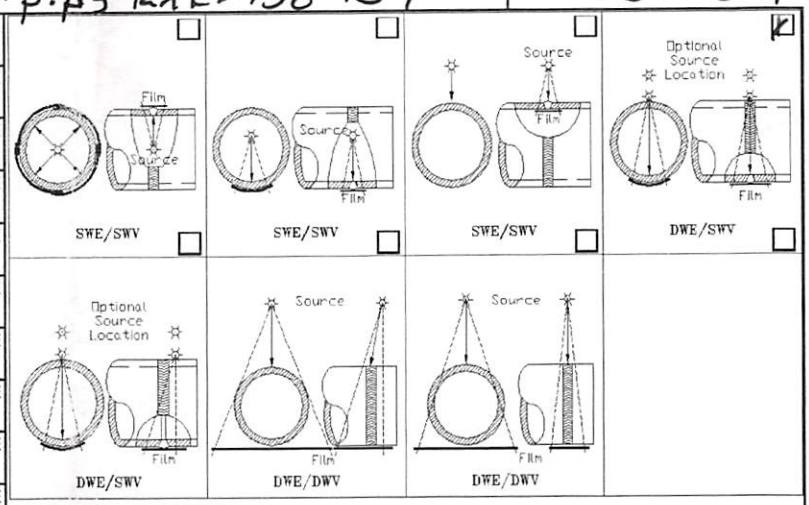
SC# _____

CUSTOMER/CONTACT Paragon | DATE 1-31-18

LOCATION/ADDRESS La, Marque, TX

UNIT/SYSTEM Coral Magellan pipipg Tank - 138-139 | P.O. 2293-4671

	A	B	C	D	E
MATERIAL	C15	C15			
THICKNESS	.375	.375			
DIAMETER	8"	12"			
REINF. THICKNESS	.125	.125			
SFD	8"	12"			
EXPOSURE TIME	1min	1 30/			
IQI SIZE/MATERIAL	B	B			
IQI LOCATION (S/F)	F	F			
SHIM THK & MAT'L					
# OF EXPOSURES	3	3			
MARKERS: NBR OR SPACING	9.03	11.93			



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS	FRONT .010 / REAR .010	FILM LOADING	FILM PROCESS: Agfa
☒ Ir ☐ Co ☐ X-Ray	90			.10X.11	lead		☒ Single ☐ Double	TIME 6 1/2 TEMP 68° ☐ AUTO ☒ MANUAL

NDE PROCEDURE: RT-RT-300-Rev0 | ACCEPTANCE STANDARD: API-1104 | SURFACE CONDITION:

STAGE OF MANUFACTURE: ☒ INTERMEDIATE ☐ FINAL ☐ REPAIR ☐ BEFORE PWHT ☐ AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-90	1-2	2to4	2to4	☑	☐		X
	2-3			☑	☐		"
	3-1			☑	☐		"
W-91	1-2			☑	☐		X
	2-3			☑	☐		"
	3-1			☑	☐		"
W-92	1-2			☑	☐		X
	2-3			☑	☐		"
	3-1			☑	☐		"
W-97	1-2			☑	☐		"
	2-3			☑	☐		"
	3-1			☑	☐		"
W-100	1-2			☑	☐		"
	2-3			☑	☐		"
	3-1			☑	☐		"

Came to Shop Grade Film check Density's

☐ ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE: 4 1/2 X 17 ~~30~~ 45 98 | FILM BRAND/TYPE: Agfa D-3 | TOTAL # OF WELDS

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
1-31-18	Jeramy	Yes ☐ No ☒	1280	12	2

Travel if Applicable Hours: 1 hour Miles/Total: 40 | Airlines ☐ Vehicle ☒ | Hours: Worked 7AM to AM and to 9pm | Total Hrs 14 hrs

Signature of Customer's Representative certifies time and material correct

Grimes, M LVII / Cuevas, A LVII

Name, Signature, and Level of Examiner — Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

BLAZER INSPECTION

Nondestructive Testing
2602 Texas Avenue • Texas City, TX 77590
(409) 948-1012

Report No. 1280
Page 2 of 2

REPORT OF RADIOGRAPHIC INSPECTION OF WELDS

Welds			Welds Acceptable		Exposures		No. of	Pipe Size	Location and Type of
X-Ray Number	By	Location	Yes	No	In	Out	Exp.	(Dia)	Defects in Rejectable Welds
W-102	K	1-2	/					8"	Density 2+of
		2-3	/						
		3-1	/						
W-103	K	1-2	/					8"	
		2-3	/						
		3-1	/						
W-104	K	1-2	/					8"	
		2-3	/						
		3-1	/						
W-106	K	1-2	/					8"	
		2-3	/						
		3-1	/						
W-107	K	1-2	/					8"	
		2-3	/						
		3-1	/						
W-108	K	1-2	/					8"	
		2-3	/						
		3-1	/						
W-110	K	1-2	/					8"	
		2-3	/						
		3-1	/						
W-111	K	1-2	/					8"	
		2-3	/						
		3-1	/						
W-89	K	1-2	/					8"	
		2-3	/						
		3-1	/						
W-99	K	1-2	/					8"	
		2-3	/						
		3-1	/						

Number of Welds Radiographed	Number of Radiographic Personnel	Travel (If applicable)	Time Worked	TOTAL HOURS
PGI		hours ____ miles ____	am ____ pm ____ am ____ pm	7780

PERDIEM Yes (No)

Signature of Radiographer LVL II

PRINTED NAME Grimes, Mike

Radiographer Assistant Cuevas, A

Signature of Co. Rep. (confirms time and material correct)

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2355

DATE 02/02/2018 TERMS Net 30

DUE DATE 03/04/2018

PURCHASE ORDER
2293-4071

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew OT @LaMarque, RT Report #1243, 2/1/2018	4	138.00	552.00
Radiographic Testing:Film:4.5x17 Inch Film	25	9.00	225.00

Equipment and truck charge located on Invoice 2354 for same crew, same day.

TOTAL DUE $777.00

- 1243

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Texas City, TX 77590
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RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 2

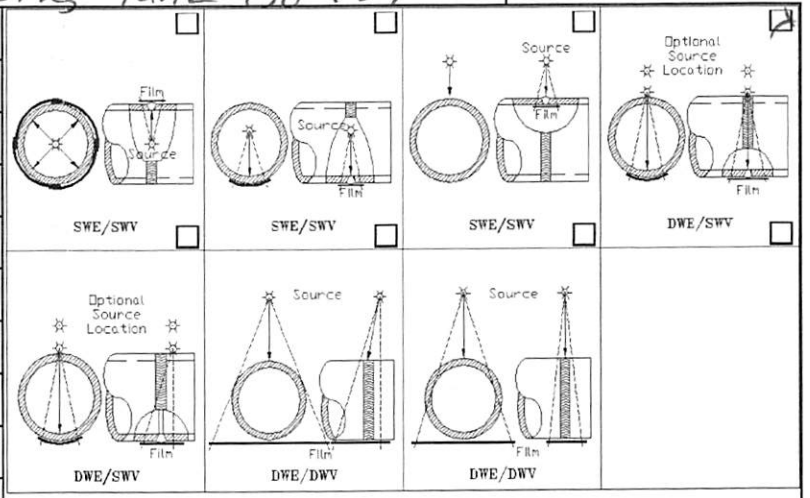
SC#

CUSTOMER/CONTACT Paragon — DATE 2-1-18

LOCATION/ADDRESS LA Marque, TX

UNIT/SYSTEM Corpus Magellan Piping Tank 138-139 — P.O. 8293-4071

	A	B	C	D	E
MATERIAL	CS				
THICKNESS	.375				
DIAMETER	20"				
REINF. THICKNESS	.125				
SFD	20"				
EXPOSURE TIME	4 Min				
IQI SIZE/MATERIAL	B				
IQI LOCATION (S/F)	F				
SHIM THK & MAT'L	/				
# OF EXPOSURES	5				
MARKERS: NBR OR SPACING	1256				



SOURCE: ☒ Ir ☐ Co ☐ X-Ray — Ci: 93 — kV — Ma — FOCAL SPOT: .10x.1 — SCREENS: Lead — FRONT .010 — REAR .010 — FILM LOADING: ☐ Single ☐ Double — FILM PROCESS: Agfa — TIME 70" — TEMP 5 — ☐ AUTO ☒ MANUAL

NDE PROCEDURE: BT-ET-300-Rev0 — ACCEPTANCE STANDARD: API-1104 — SURFACE CONDITION

STAGE OF MANUFACTURE: ☒ INTERMEDIATE ☐ FINAL ☐ REPAIR ☐ BEFORE PWHT ☐ AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-36	1-2	2 to 4	2 to 4	☑	☐		X
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		X
	5-1			☑	☐		
W-37	1-2			☑	☐		
	2-3			☑	☐		
	3-4			☑	☐		X
	4-5			☑	☐		
	5-1			☑	☐		X
W-57	1-2			☑	☐		
	2-3			☑	☐		
	3-4			☑	☐		X
	4-5			☑	☐		
	5-1			☑	☐		

☐ ADDITIONAL PAGES — COMMENTS:

OF FILM AND SIZE: 4 1/2x17 25 — FILM BRAND/TYPE: Agfa D-3 — TOTAL # OF WELDS: 5

Date: 2-1-18 — Customer Contact: Jeramy — Per Diem: Yes ☐ No ☐ — Report #: 1213 — Unit #: 12 — No. on Job: 2

Travel if Applicable — Hours: 1 hour — Miles Total: 40 — Airlines ☐ — Vehicle ☒ — Hours: Worked 6 AM to AM and to 10 PM — Total Hrs: 4 hrs

Jeramy Swedgren

Signature of Customer's Representative certifies time and material correct

G R L Cuevas Cuevas, A

Name, Signature, and Level of Examiner — Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

RT-BI-001

BLAZER INSPECTION

Nondestructive Testing
2602 Texas Avenue • Texas City, TX 77590
(409) 948-1012

Report No. 1743

REPORT OF RADIOGRAPHIC INSPECTION OF WELDS

Pg 2 of 2

Welds			Welds Acceptable		Exposures		No. of	Pipe Size	Location and Type of
X-Ray Number	By	Location	Yes	No	In	Out	Exp.	(Dia)	Defects in Rejectable Welds
W-55	X	1-2	/					20"	Density 2+4
		2-3	/						
		3-4	/						
		4-5	/						
		5-1	/						
W-88	X	1-2	/					20"	
		2-3	/						
		3-4	/						
		4-5	/						
		5-1	/						

Number of Welds Radiographed	Number of Radiographic Personnel	Travel (if applicable)	Time Worked	TOTAL HOURS
PGI	2	hours ____ miles ____	am ____ pm ____ am ____ pm	1743

PERDIEM Yes No	Signature of Radiographer	Radiographer Assistant	Signature of Co. Rep. (confirms time and material correct)
		Cuevas, A	

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2356

DATE 02/05/2018 TERMS Net 30

DUE DATE 03/07/2018

PURCHASE ORDER
2293-4671

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew OT	10	138.00	1,380.00
Radiographic Testing:Film:4.5x17 Inch Film	42	9.00	378.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $1,873.00

2602 Texas Avenue
Texas City, TX 77590
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Fax (409) 948-0839
www.blazerinspection.com

RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 2

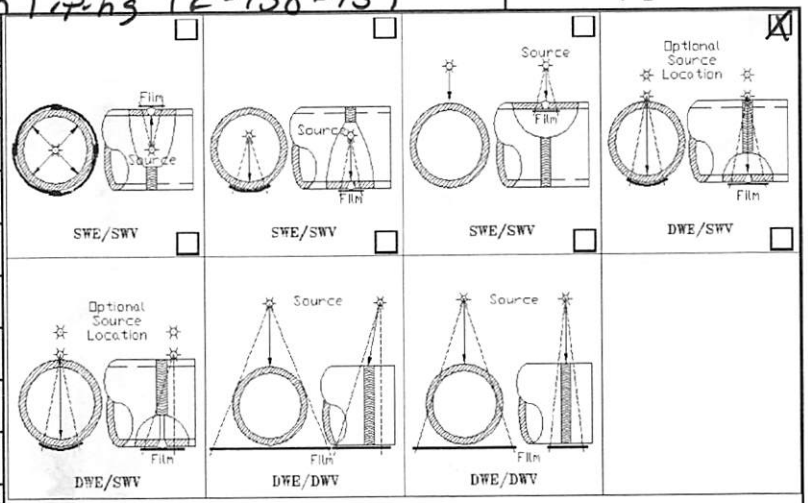
SC#

CUSTOMER/CONTACT Paragon — DATE 2-3-18

LOCATION/ADDRESS La, Marque, TX

UNIT/SYSTEM Corval Magellan Piping TK-138-139 — P.O. 2293-4671

	A	B	C	D	E
MATERIAL	20" A	18" B	12" C	10" D	E
THICKNESS	.375 A	.375 B	.375 C	.375 D	E
DIAMETER	20" A	18" B	12" C	10" D	E
REINF. THICKNESS	.125 A	.125 B	.125 C	.125 D	E
SFD	20" A	18" B	12" C	10" D	E
EXPOSURE TIME	8min A	5½ min B	3½ min C	2½ D	E
IQI SIZE/MATERIAL	B A	B B	B C	B D	E
IQI LOCATION (S/F)	F A	F B	F C	F D	E
SHIM THK & MAT'L	A	B	C	D	E
# OF EXPOSURES	6 A	4 B	3 C	3 D	E
MARKERS: NBR OR SPACING	12.56 A	12.56 B	11.03 C	9.03 D	E



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS	FILM LOADING	FILM PROCESS
☒ Ir	93			.10x.11	lead	FRONT 810	☒ Single ☐ Double	Agfa
☐ Co						REAR 810	TIME 5 min
☐ X-Ray							TEMP 68°

NDE PROCEDURE BI-ET-300-Rev0 — ACCEPTANCE STANDARD API-1104 — SURFACE CONDITION — ☐ AUTO ☒ MANUAL

STAGE OF MANUFACTURE ☐ INTERMEDIATE ☐ FINAL ☐ REPAIR ☐ BEFORE PWHT ☐ AFTER PWHT

C - CRACK; SL - SLAG; T - TUNGSTEN; CP - CLUSTER POROSITY; P - POROSITY/GAS POCKET; HB - HOLLOW BEAD; IP - INSUFFICIENT PENETRATION; IF - INSUFFICIENT FUSION; EP - EXCESSIVE PENETRATION; EU - EXTERNAL UNDERCUT; IU - INTERNAL UNDERCUT; IC - INTERNAL CONCAVITY; SU - SURFACE; HL - IP DUE TO HIGH/LOW; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-86	1-2			☑	☐		X
	2-3			☑	☐		↓
	3-4			☑	☐		↓
	4-5			☑	☐		↓
	5-1			☑	☐		↓
W-87	1-2			☑	☐		X
	2-3			☑	☐		↓
	3-4			☑	☐		↓
	4-5			☑	☐		↓
	5-1			☑	☐		↓
W-115	1-2			☑	☐		X
	2-3			☑	☐		↓
	3-4			☑	☐		↓
	4-5			☑	☐		↓
	5-1			☐	☐		↓

☐ ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE 4½x17 42 — FILM BRAND/TYPE Agfa D3 — TOTAL # OF WELDS 9

Date 2-3-18 — Customer Contact J — Per Diem Yes ☐ No ☒ — Report # 1782 — Unit # 12 — No. on Job 2

Travel if Applicable Hours: 1 hour — Miles Total: 40 — Airlines ☐ Vehicle ☒ — Hours: Worked 6 am AM and to 4 pm — Total Hrs 10 hrs

Signature of Customer's Representative certifies time and material correct — Name, Signature, and Level of Examiner: Grimes, M LVII / DeVine, C Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

1282
- 1043

2602 Texas Avenue
Texas City TX 77590
Office (409) 948-1012
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READER SHEET

Page 2 of 2

SC# 1282

CUSTOMER/CONTACT Paragon | DATE 2-3-18

LOCATION/ADDRESS La Marque, TX

UNIT/SYSTEM CMPT - 138, 139 | P.O. 2293-4671

C - CRACK, CP - CLUSTER POROSITY, IP - INSUFFICIENT PENETRATION, EU - EXTERNAL UNDERCUT, SU - SURFACE
SL - SLAG, P - POROSITY/GAS POCKET, IF - INSUFFICIENT FUSION, IU - INTERNAL UNDERCUT, HL - IP DUE TO HIGH/LOW
T - TUNGSTEN, HB - HOLLOW BEAD, EP - EXCESSIVE PENETRATION, IC - INTERNAL CONCAVITY, BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-56	1-2	2 Hot	2 Hot	☐	☒	N/F	K
	2-3			☐	☒	N/F	
	3-1			☒	☐		
W-34	1-2			☑	☐		K
	2-3			☑	☐		
	3-1			☑	☐		
W-62	1-2			☑	☐		X
	2-3			☑	☐		
	3-4			☑	☐		
	4-1			☑	☐		
W-63	1-2			☑	☐		
	2-3			☑	☐		X
	3-4			☑	☐		
	4-1			☑	☐		
W-64	1-2			☑	☐		X
	2-3			☑	☐		
	3-4			☑	☐		
	4-1			☑	☐		
W-69	1-2			☑	☒	SB	X ICSB INCOMP
	2-3			☑	☐		
	3-4			☑	☐		
	4-1			☑	☐		

Signature of Customer's Representative certifies time and material correct

Name, Signature, and Level of Examiner: [illegible] DeVine, C

Assistant

Customer signature indicates satisfactory performance and agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file.

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2373

DATE 02/06/2018 TERMS Net 30

DUE DATE 03/08/2018

PURCHASE ORDER
2293-4686

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @LaMarque, RT Report #252018-8	8	92.00	736.00
Radiographic Testing:2 Person Radiography Crew OT	4	138.00	552.00
Radiographic Testing:Film:4.5x17 Inch Film	48	9.00	432.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $1,835.00

BLAZER INSPECTION, INC.
2602 Texas Avenue
Texas City, TX 77590
Office (409) 948-1012
Fax (409) 948-0839
www.blazerinspection.com

RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 2

SC# 252018-8

CUSTOMER/CONTACT Paragon

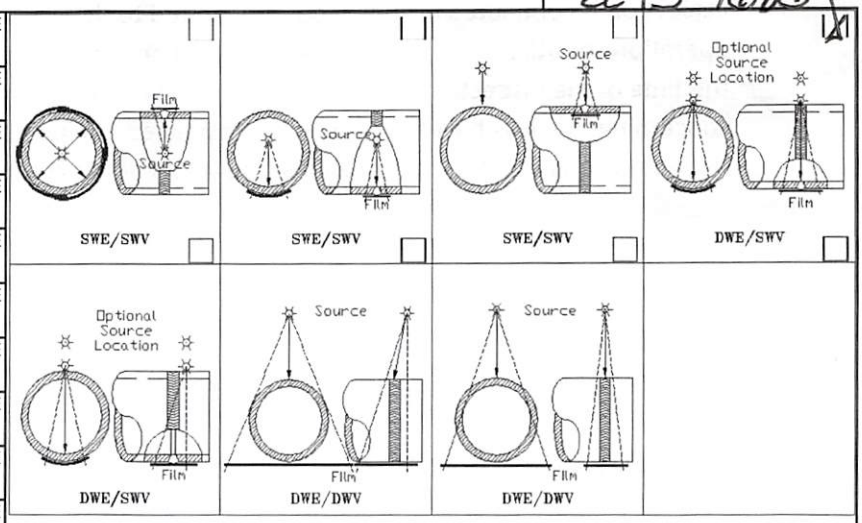
DATE 2-5-18

LOCATION/ADDRESS Corvat Magellan Piping Tks 138+139

UNIT/SYSTEM

P.O. 2293-46860

	A	B	C	D	E
MATERIAL	CS	–	–		
THICKNESS	STD	–	–		
DIAMETER	24"	18"	16"		
REINF. THICKNESS	.125	–	–		
SFD	24.125	18.125	16.125		
EXPOSURE TIME	14	8	6		
IQI SIZE/MATERIAL	Bwire	-	-		
IQI LOCATION (S/F)	F	–	–		
SHIM THK & MAT'L	NA	-	–		
# OF EXPOSURES	6	5	4		
MARKERS: NBR OR SPACING	12.56	11.31	12.56		



SOURCE: [X] Ir [ ] Co [ ] X-Ray

Ci: 62 | kV | Ma | FOCAL SPOT: .10X.11 | SCREENS: FRONT .005 REAR .005 | FILM LOADING: [X] Single [ ] Double | FILM PROCESS: AGFA TIME 3 min | TEMP: [ ] AUTO [X] MANUAL

NDE PROCEDURE: BIRT300 REV0 | ACCEPTANCE STANDARD: API 1104 | SURFACE CONDITION: metal

STAGE OF MANUFACTURE: [ ] INTERMEDIATE [ ] FINAL [ ] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-8	1-2	3.3	3.1	✓			X
	2-3	3.2	3.2				
	3-4	3.4	3.4				
	4-5	3.2	3.6				
	5-6	3.1	3.3				
	6-1	3.1	3.5				
W-9	1-2	3.2	3.3				
	2-3	3.4	3.3				
	3-4	2.6	3.7				
	4-5	3.3	3.6				
	5-6	3.4	3.6				
	6-1	3.2	3.7	✓			X

[X] ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE: (48) 4.5" x 17" | FILM BRAND/TYPE: AGFA D-3 | TOTAL # OF WELDS: (9)

Date: 2-5-18 | Customer Contact: Jeremy | Per Diem: Yes [ ] No [X] | Report #: 252018-8 | Unit #: 6 | No. on Job: 2

Travel if Applicable: Hours: 1 Miles Total: 20 | Airlines [ ] Vehicle [X] | Hours: Worked to 9 AM and to 9 PM | Total Hrs: 12 HRS.

Jeremy [signature] — Signature of Customer's Representative certifies time and material correct

Eric Tracy [signature] C. Trahan — Name, Signature, and Level of Examiner / Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

RT-BI-001

Acknowledgement:

The test results reported herein by the inspection technician are valid at the time of inspection only. Blazer Inspection, Inc. is not responsible for any changes in the state of the equipment after the inspection is completed including but not limited to: final installation practices, mechanical controls, operations or utilization parameters, or any other change in the state of the equipment from its state at the time of the inspection; and, makes no assertion, finding, representation, guarantee or warranty concerning the possible effects upon the inspected equipment from such changes, or the state of such inspected equipment at any time after the inspection is completed.

BLAZER INSPECTION

Nondestructive Testing
2602 Texas Avenue • Texas City, TX 77590
(409) 948-1012

252018-8

Report No.

REPORT OF RADIOGRAPHIC INSPECTION OF WELDS

Welds			Welds Acceptable		Exposures		No. of	Pipe Size	Location and Type of
X-Ray Number	By	Location	Yes	No	In	Out	Exp.	(Dia)	Defects in Rejectable Welds
W-21	E	1-2	✓			✓	1	16"	2.99
		2-3							3.61
		3-4							3.5
		4-1						16"	3.8
W-75	X	1-2						18"	2.9
		2-3							3.1
		3-4							2.8
		4-5							2.9
		5-1						18"	2.6
W-77	X	1-2							2.4
		2-3							2.5
		3-4							2.6
		4-5							3.1
		5-1						18"	3.2
W-83R	X	1-2						16"	2.9
		2-3							3.2
		3-4							3.4
		4-1						16"	3.0
W-76	X	1-2						18"	3.1
		2-3							2.9
		3-4							3.1
		4-5							2.7
		5-1						18"	3.2
W-2	X	1-2						24"	3.3
		2-3							3.4
		3-4							3.7
		4-5							3.3
		5-6							2.8
		6-1							3.1
W-16	X	1-2						24"	2.8
		2-3						24"	2.3
		3-4							3.7
		4-5							3.5
		5-6							3.6
		6-1	✓			✓	1	24"	3.8

Number of Welds Radiographed	Number of Radiographic Personnel	Travel (If applicable)	Time Worked	TOTAL HOURS
9	2	hours ____ miles ____	am ____ am ____ pm ____ pm	See Ticket 252018-8

PERDIEM Yes (No)

Signature of Radiographer LVL II

PRINTED NAME Erik Eads

Radiographer Assistant C. Trahan

Signature of Co. Rep. (confirms time and material correct)

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2378

DATE 02/07/2018 TERMS Net 30

DUE DATE 03/09/2018

PURCHASE ORDER
2293-4691

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @LaMarque, RT Report #10-262018, 2/6/2018	8	92.00	736.00
Radiographic Testing:Film:4.5x17 Inch Film	38	9.00	342.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $1,193.00

10-26 2018

BLAZER INSPECTION, INC.
2202 Texas Avenue
Texas City, TX 77590
Office (409) 948-1012
Fax (409) 948-0839
www.blazerinspection.com

RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 2

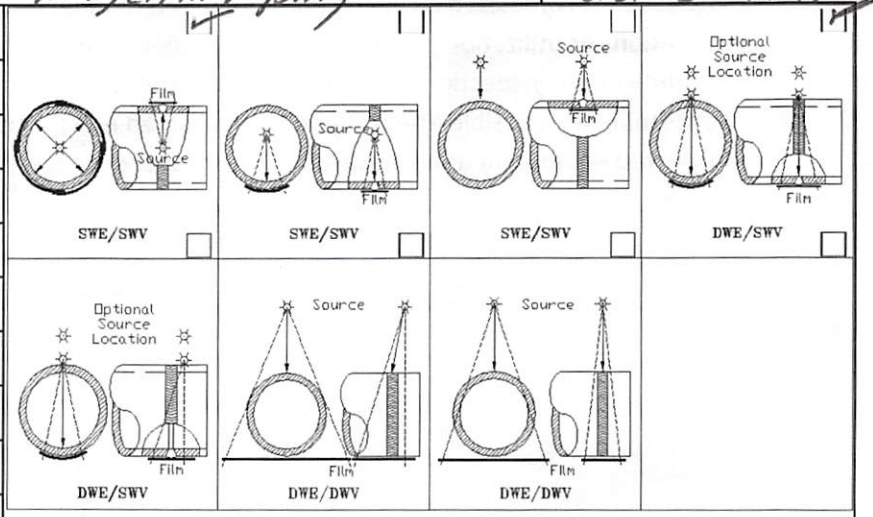
SC#

CUSTOMER/CONTACT Paragon | DATE 2/6/18

LOCATION/ADDRESS LaMarque, Tx. TK#138 & #139

UNIT/SYSTEM J/N#2293 - Corval Magellan Piping | P.O. 2293-4691

	A	B	C	D	E
MATERIAL	CS	CS			
THICKNESS	.375	.375			
DIAMETER	16	30			
REINF. THICKNESS	.125	.125			
SFD	16	15			
EXPOSURE TIME	5m	3m			
IQI SIZE/MATERIAL	B	B			
IQI LOCATION (S/F)	F	F			
SHIM THK & MAT'L	.375	.375			
# OF EXPOSURES	2	2			
MARKERS: NBR OR SPACING	12.5	13.4			



SOURCE: [x] Ir [ ] Co [ ] X-Ray | Ci: 50 | kV: | Ma: | FOCAL SPOT: .10x.11 | SCREENS: FRONT .010 REAR .010 | FILM LOADING: [x] Single [ ] Double | FILM PROCESS: TIME 6 min TEMP 71 [ ] AUTO [x] MANUAL

NDE PROCEDURE: RT-300 | ACCEPTANCE STANDARD: API 1104 | SURFACE CONDITION: smooth

STAGE OF MANUFACTURE: [ ] INTERMEDIATE [x] FINAL [ ] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W#13	1-2	2 to 4		✓			"X"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-6			✓			
	6-7			✓			
	7-1			✓			
W#14	1-2			✓			"X"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-6			✓			
	6-7			✓			
	7-1			✓			

[x] ADDITIONAL PAGES | COMMENTS: #1096

OF FILM AND SIZE: (38) - 4.5" x 17" | FILM BRAND/TYPE: Agfa D3 | TOTAL # OF WELDS: 5

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
2/6/18	Jeremy	Yes [ ] No [x]	10-26 2018	10	2

Travel if Applicable: Hours: N/A Miles Total: N/A | Airlines [ ] Vehicle [x] | Hours: Worked to 2 PM ~~AM~~ and to 10 (PM) | Total Hrs: 8

Stacy Martin
Signature of Customer's Representative certifies time and material correct

Mark DeRise II / Coy DeRise
Name, Signature, and Level of Examiner / Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

Acknowledgement:

The test results reported herein by the inspection technician are valid at the time of inspection only. Blazer Inspection, Inc. is not responsible for any changes in the state of the equipment after the inspection is completed including but not limited to: final installation practices, mechanical controls, operations or utilization parameters, or any other change in the state of the equipment from its state at the time of the inspection; and, makes no assertion, finding, representation, guarantee or warranty concerning the possible effects upon the inspected equipment from such changes, or the state of such inspected equipment at any time after the inspection is completed.

 2-26-2018

- 1096

2602 Texas Avenue
Texas City TX 77590
Office (409) 948-1012
Fax (409) 948-0839
www.blazerinspection.com

READER SHEET

Page 2 of 2

SC#

CUSTOMER/CONTACT Paragon

DATE 2/6/18

LOCATION/ADDRESS La Marque, Tx.

UNIT/SYSTEM J/W# 2293

P.O. 2293-4691

C - CRACK
SL - SLAG
T - TUNGSTEN
CP - CLUSTER POROSITY
P - POROSITY/GAS POCKET
HB - HOLLOW BEAD
IP - INSUFFICIENT PENETRATION
IF - INSUFFICIENT FUSION
EP - EXCESSIVE PENETRATION
EU - EXTERNAL UNDERCUT
IU - INTERNAL UNDERCUT
IC - INTERNAL CONCAVITY
SU - SURFACE
HL - IP DUE TO HIGH/LOW
BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W#15	1-2	2	2.04	☑	☐		"X"
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-7			☑	☐		
	7-1			☑	☐		
W#17	1-2			☑	☐		"E"
	2-3			☑	☐		"E"
	3-4			☑	☐		
	4-1			☑	☐		
W#18	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-4			☑	☐		
	4-1			☑	☐		
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Stacy Martin
Signature of Customer's Representative certifies time and material correct

Mark DeLine II / Cory DeLine
Name, Signature, and Level of Examiner — Assistant

Customer signature indicates satisfactory performance and agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file.

PARAGON FABRICATORS, INC.
500 MAIN STREET
LAMARQUE, TEXAS 77568

DAILY SHOOTING SHEET

DATE 6-Feb

PAGE 1 OF 1

P.O.# 2293-4691

GRADE TO API 1104

D3 FILM

CORVAL MAGELLAN PIPING TANKS#138 & #139

PARAGON JOB#	WELD #	EXTENT	SIZE	THK.	WELDER STENCIL	JOINT	MATERIAL TYPE	REMARKS
2293	W13	100%	30" OD	.375"	"X"	BUTT WELD	CARBON STEEL	DWG.#475-D-3916F PFI ISO#3916F
2293	W14	100%	30" OD	.375"	"X"	BUTT WELD	CARBON STEEL	DWG.#475-D-3876 PFI ISO#3801S-D-D
2293	W15	100%	30" OD	.375"	"X"	BUTT WELD	CARBON STEEL	DWG.#475-D-3717A PFI ISO#3717-D-D
2293	W17	100%	16" OD	.375"	"E"	BUTT WELD	CARBON STEEL	DWG.#475-D-3922C PFI ISO#3922C-A-A
2293	W18	100%	16" OD	.375"	"E"	BUTT WELD	CARBON STEEL	DWG.#475-D-3922C PFI ISO#3922C-A-A

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2401

DATE 02/12/2018 TERMS Net 30

DUE DATE 03/14/2018

PURCHASE ORDER
2293-4693

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @LaMarque, RT 10-292018-1 & 10-292018-2, 2/13/2018	8	92.00	736.00
Radiographic Testing:2 Person Radiography Crew OT	2	138.00	276.00
Radiographic Testing:Film:4.5x17 Inch Film	43	9.00	387.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $1,514.00

10-292018-1

BLAZER INSPECTION, INC
2002 Texas Avenue
Texas City, TX 77590
Office (409) 948-1012
Fax (409) 948-0839
www.blazerinspection.com

RADIOGRAPHIC EXAMINATION REPORT

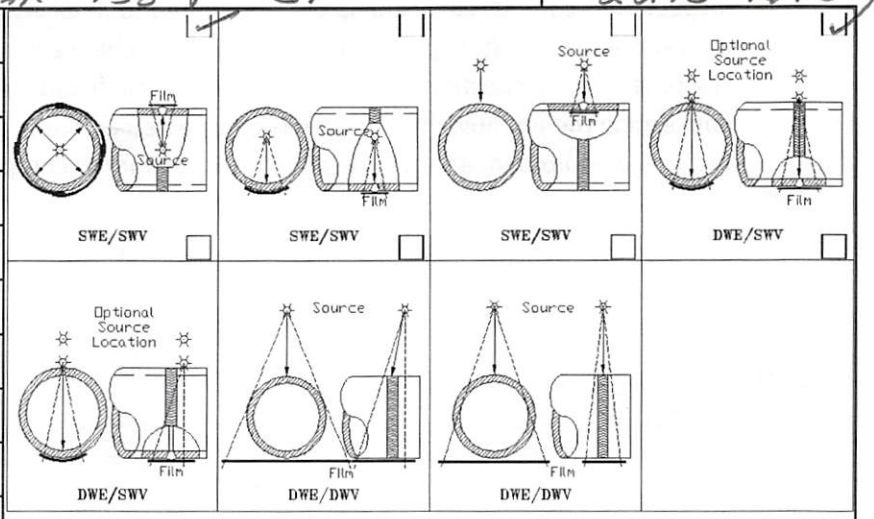
SC# _____

CUSTOMER/CONTACT Paragon | DATE 2/9/18

LOCATION/ADDRESS LaMarque, Tx.

UNIT/SYSTEM J/N# 2293 - Piping Tank #138 & #139 | P.O. 2293-4693

	A	B	C	D	E
MATERIAL	CS	CS	CS	CS	
THICKNESS	.375	.375	.375	.375	
DIAMETER	24	16	12.7	8.6	
REINF. THICKNESS	.125	.125	.125	.125	
SFD	11.5	~~16~~ 16	12.7	8.6	
EXPOSURE TIME	1 1/2	4	2 1/2	1 1/2	
IQI SIZE/MATERIAL	B	B	B	B	
IQI LOCATION (S/F)	F	F	F	F	
SHIM THK & MAT'L	.375	.375	.375	.375	
# OF EXPOSURES	2	2	3	3	
MARKERS: NBR OR SPACING	12.5	12.5	11.2	9	



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS	FRONT	FILM LOADING	FILM PROCESS:
[x] Ir	60			.10x.11	.010	REAR .010	[x] Single [ ] Double	TIME 6 min
[ ] Co								TEMP 71
[ ] X-Ray								[ ] AUTO [x] MANUAL

NDE PROCEDURE: RT-300 | ACCEPTANCE STANDARD: API 1104 | SURFACE CONDITION: Smooth

STAGE OF MANUFACTURE [ ] INTERMEDIATE [x] FINAL [x] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W#44 R	1-2	2 to 4		✓			"X"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-6			✓			
	6-1			✓			
W#11	1-2			✓			"X"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-6			✓			
	6-1	↓	↓	✓			

[x] ADDITIONAL PAGES COMMENTS: #10-292018-2

OF FILM AND SIZE: (43) - 4.5"x17" | FILM BRAND/TYPE: Agfa D3 | TOTAL # OF WELDS: 15

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
2/9/18	Jeremy	Yes [ ] No [x]	10-292018-1	10	2

Travel if Applicable: Hours: N/A Miles Total: N/A | Airlines [ ] Vehicle [x] | Hours: Worked to 7 (AM) and to 5 (PM) | Total Hrs 10

Signature of Customer's Representative certifies time and material correct

Mark DeVine II / Cory DeVine
Name, Signature, and Level of Examiner / Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

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BLAZER INSPECTION, INC.
2602 Texas Avenue
Texas City TX 77590
Office (409) 948-1012
Fax (409) 948-0839
www.blazerinspection.com

10-29 2018-2

READER SHEET

Page 2 of 2

SC#

CUSTOMER/CONTACT Paragon | DATE 2/9/18

LOCATION/ADDRESS LaMarque, T-x.

UNIT/SYSTEM J/W# 2293 - Piping Tank# 138 & #139 | P.O. 2293-4693

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W#83R	1-2	2 to 4		☑	☐		"X"
	2-3			☑	☐		
	3-4			☑	☐		
	4-1			☑	☐		
W#52	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-1			☑	☐		
W#66	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-1			☑	☐		
W#67	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-1			☑	☐		
W#68	1-2			☑	☐		"K"
	2-3			☑	☐		
	3-1			☑	☐		
W#51	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-1			☑	☐		
W#80	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-1			☑	☐		
W#81	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-1			☑	☐		
W#79	1-2			☑	☐		"K"
	2-3			☑	☐		
	3-1			☑	☐		
W#98	1-2			☑	☐		"X"
	2-3			☑	☐		
	3-1			☑	☐		
W#108	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-1			☑	☐		
W#109	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-1			☑	☐		
W#111	1-2			☑	☐		"E"
	2-3			☑	☐		
	3-1			☑	☐		

Signature of Customer's Representative certifies time and material correct

Mark DeVine II / Cory DeVine
Name, Signature, and Level of Examiner / Assistant

Customer signature indicates satisfactory performance and agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file.

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Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2416

DATE 02/13/2018 TERMS Net 30

DUE DATE 03/15/2018

PURCHASE ORDER
2293-4693

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @LaMarque, RT Report #10-2122018-1 through 10-2122018-3, 2/12/2018	8	92.00	736.00
Radiographic Testing:2 Person Radiography Crew OT	2	138.00	276.00
Radiographic Testing:Film:4.5x17 Inch Film	55	9.00	495.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $1,622.00

10-2122018-1

2602 Texas Avenue
Texas City, TX 77590
Office (409) 948-1012
Fax (409) 948-0839
www.blazerinspection.com

RADIOGRAPHIC EXAMINATION REPORT

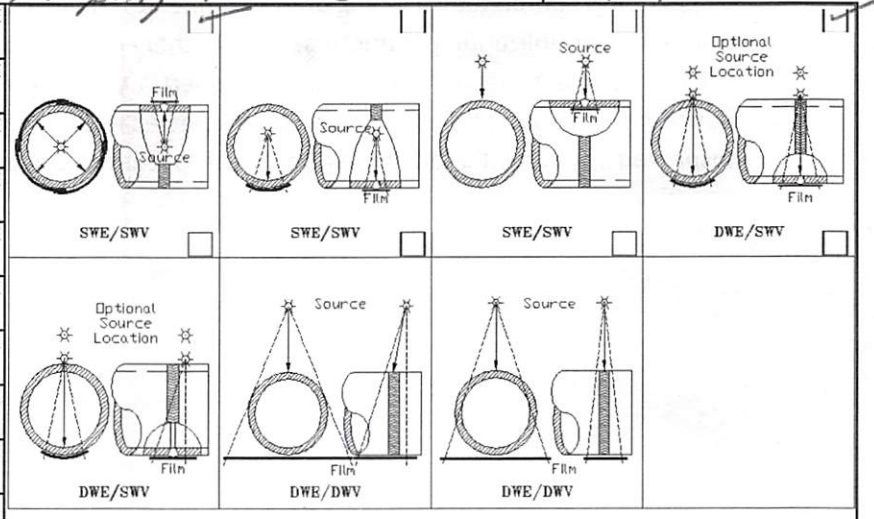
SC#

CUSTOMER/CONTACT Paragon | DATE 2/12/18

LOCATION/ADDRESS LaMarque, Tx.

UNIT/SYSTEM J/W# 2293 - Magellan Piping TK #138 + #139 | P.O. 2293-4693

	A	B	C	D	E
MATERIAL	CS	CS	CS	CS	CS
THICKNESS	.375	.375	.375	.375	.375
DIAMETER	8.6	18	10.7	12.7	24
REINF. THICKNESS	.125	.125	.125	.125	.125
SFD	8.6	18	10.7	12.7	11.5
EXPOSURE TIME	1.45	8 min	2.45	3.05	2
IQI SIZE/MATERIAL	B	B	B	B	B
IQI LOCATION (S/F)	F	F	F	F	F
SHIM THK & MAT'L	.375	.375	.375	.375	.375
# OF EXPOSURES	3	3	3	3	2
MARKERS: NBR OR SPACING	9	11	11.2	13.3	12.5



SOURCE: [x] Ir [ ] Co [ ] X-Ray | Ci: 40 | kV | Ma | FOCAL SPOT: .10x.11 | SCREENS: FRONT .010 REAR .010 | FILM LOADING: [x] Single [ ] Double | FILM PROCESS: TIME 6 min TEMP 71 [ ] AUTO [x] MANUAL

NDE PROCEDURE: RT-300 | ACCEPTANCE STANDARD: API 1104 | SURFACE CONDITION: Smooth

STAGE OF MANUFACTURE: [ ] INTERMEDIATE [x] FINAL [x] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W#114	1-2	2 to 4		✓			"X"
"	2-3	"	"	✓			"
"	3-1	"	"	✓			"
W#105	1-2	"	"	✓			"X"
"	2-3	"	"	✓			"
"	3-1	"	"	✓			"
W#69R	1-2	"	"	✓			"E"
"	2-3	"	"	✓			"
"	3-4	"	"	✓			"
"	4-5	"	"	✓			"
"	5-1	"	"	✓			"

[x] ADDITIONAL PAGES 2 | COMMENTS: 10-2122018-2 + 10-2122018-3

OF FILM AND SIZE: (55) - 4.5"x17" | FILM BRAND/TYPE: Agfa D3 | TOTAL # OF WELDS: 14

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
2/12/18	Jeremy	Yes [ ] No [x]	10-2122018-1	10	2

Travel if Applicable: Hours: N/A Miles Total: N/A | Airlines [ ] Vehicle [x] | Hours: Worked to 7 (AM) and to 5 (PM) | Total Hrs 10

Signature of Customer's Representative certifies time and material correct

Mark DeVine II / Mary DeVine

Name, Signature, and Level of Examiner / Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

Acknowledgement:

The test results reported herein by the inspection technician are valid at the time of inspection only. Blazer Inspection, Inc. is not responsible for any changes in the state of the equipment after the inspection is completed including but not limited to: final installation practices, mechanical controls, operations or utilization parameters, or any other change in the state of the equipment from its state at the time of the inspection; and, makes no assertion, finding, representation, guarantee or warranty concerning the possible effects upon the inspected equipment from such changes, or the state of such inspected equipment at any time after the inspection is completed.

2018-7

2602 Texas Avenue
Texas City TX 77590
Office (409) 948-1012
Fax (409) 948-0839
www.blazerinspection.com

READER SHEET

Page 2 of 3

SC#

CUSTOMER/CONTACT Paragon | DATE 2/12/18

LOCATION/ADDRESS LaMarque, TX

UNIT/SYSTEM J/W #2293 - Magellan Piping TK#138 & #39 | P.O. 2293-4693

C - CRACK, SL - SLAG, T - TUNGSTEN, CP - CLUSTER POROSITY, P - POROSITY/GAS POCKET, HB - HOLLOW BEAD, IP - INSUFFICIENT PENETRATION, IF - INSUFFICIENT FUSION, EP - EXCESSIVE PENETRATION, EU - EXTERNAL UNDERCUT, IU - INTERNAL UNDERCUT, IC - INTERNAL CONCAVITY, SU - SURFACE, HL - IP DUE TO HIGH/LOW, BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W#46	1-2	2 to 4		✓			"E"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-1			✓			
W#82	1-2			✓			"X"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-1			✓			
W#112	1-2			✓			"E"
	2-3			✓			
	3-1			✓			
W#56R	1-2			✓			"X"
	2-3			✓			
	3-1			✓			
W#57R	1-2			✓			"X"
	2-3			✓			
	3-1			✓			
W#115	1-2			✓			"X"
	2-3			✓			
	3-1			✓			
W#34	1-2			✓			"E"
	2-3			✓			
	3-1			✓			
W#33	1-2			✓			"K"
	2-3			✓			
	3-1			✓			
W#32	1-2			✓			"K"
	2-3			✓			
	3-1			✓			
W#4R	1-2			✓			"X"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-6			✓	X	P	
	6-1	✓	✓	✓			

Signature of Customer's Representative certifies time and material correct

Mark DeBose II / Cory DeBose — Name, Signature, and Level of Examiner — Assistant

Customer signature indicates satisfactory performance and agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file.

Acknowledgement:

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10-2/12/2018-3

2602 Texas Avenue
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Office (409) 948-1012
Fax (409) 948-0839
www.blazerinspection.com

READER SHEET

Page 3 of 3

SC# _____

CUSTOMER/CONTACT Paragon | DATE 2/12/18

LOCATION/ADDRESS LaMarque, Tx.

UNIT/SYSTEM J/N #2293 - Magellan Piping Tk #138 & #139 | P.O. 2293-4693

C - CRACK CP - CLUSTER POROSITY IP - INSUFFICIENT PENETRATION EU - EXTERNAL UNDERCUT SU - SURFACE
SL - SLAG P - POROSITY/GAS POCKET IF - INSUFFICIENT FUSION IU - INTERNAL UNDERCUT HL - IP DUE TO HIGH/LOW
T - TUNGSTEN HB - HOLLOW BEAD EP - EXCESSIVE PENETRATION IC - INTERNAL CONCAVITY BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W#73A	1-2	2 to 4		✓			"X" - "E"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-6			✓			
	6-1			✓			

Signature of Customer's Representative certifies time and material correct

Mark DeVine II / Cory DeVine
Name, Signature, and Level of Examiner Assistant

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Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2417

DATE 02/14/2018 TERMS Net 30

DUE DATE 03/16/2018

PURCHASE ORDER
2293-4701

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @LaMarque, RT Report #10-2132018-A, 2/13/2018	6	92.00	552.00
Radiographic Testing:Film:4.5x17 Inch Film	3	9.00	27.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $694.00

10-2132018-A

BLAZER INSPECTION, INC.
2002 Texas Avenue
Texas City, TX 77590
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Fax (409) 948-0839
www.blazerinspection.com

RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 1

SC#

CUSTOMER/CONTACT Paragon

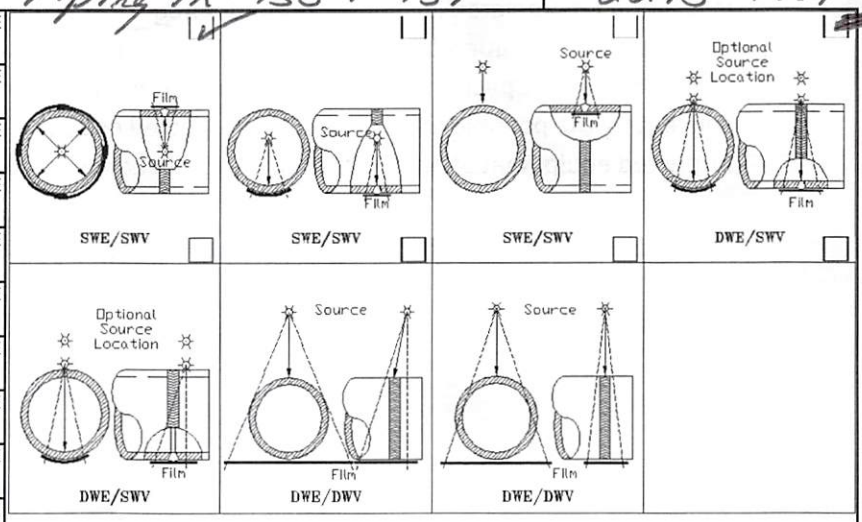
DATE 2/13/18

LOCATION/ADDRESS LaMarque, Tx.

UNIT/SYSTEM S/N#2293 - Magellan Piping TK#138 & #139

P.O. 2293-4701

	A	B	C	D	E
MATERIAL	CS				
THICKNESS	.375				
DIAMETER	24				
REINF. THICKNESS	.125				
SFD	11.5				
EXPOSURE TIME	2				
IQI SIZE/MATERIAL	B				
IQI LOCATION (S/F)	F				
SHIM THK & MAT'L	.375				
# OF EXPOSURES	1				
MARKERS: NBR OR SPACING	12.5				



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS	FILM LOADING	FILM PROCESS:
[x] Ir	40			.10x.11	FRONT .010	[x] Single [ ] Double	TIME 6.5
[ ] Co					REAR .010		TEMP 70
[ ] X-Ray							[ ] AUTO [x] MANUAL

NDE PROCEDURE RT-300 | ACCEPTANCE STANDARD API 1104 | SURFACE CONDITION Smooth

STAGE OF MANUFACTURE [ ] INTERMEDIATE [x] FINAL [x] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W#412	1-2	2 to 4		[x]	[ ]		"x"
				[ ]	[ ]		
				[ ]	[ ]		
W#73A	1-2	2 to 4		[x]	[ ]		"x"
V	[redacted]	V	V	[ ]	[ ]		"x"
				[ ]	[ ]		
				[ ]	[ ]		
				[ ]	[ ]		
				[ ]	[ ]		
				[ ]	[ ]		
				[ ]	[ ]		
				[ ]	[ ]		
				[ ]	[ ]		
				[ ]	[ ]		
				[ ]	[ ]		
				[ ]	[ ]		
				[ ]	[ ]		

[ ] ADDITIONAL PAGES COMMENTS: None

OF FILM AND SIZE (3) - 4.5" x 17" | FILM BRAND/TYPE Agfa D3 | TOTAL # OF WELDS 2

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
2/13/18	Jeremy	Yes [ ] No [x]	10-2132018-A	10	2

Travel if Applicable Hours: N/A Miles Total: N/A | Airlines [ ] Vehicle [x] | Hours: Worked to 9 (AM) and to 3 (PM) | Total Hrs 6

Signature of Customer's Representative certifies time and material correct

Mark DeVise II / Cory DeVise

Name, Signature, and Level of Examiner / Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

Acknowledgement:

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PARAGON FABRICATORS, INC.
500 MAIN STREET
LAMARQUE, TEXAS 77568

DAILY SHOOTING SHEET

DATE 12-Feb
PAGE 1 OF 1

GRADE TO API 1104
D3 FILM
P.O.# 2293-4701
CORVAL MAGELLAN PIPING TANKS#138 & #139

PARAGON JOB#	WELD #	EXTENT	SIZE	THK.	WELDER STENCIL	JOINT	MATERIAL TYPE	REMARKS
2293	W4-R	view 5-6	24" OD	.375"	"X"	BUTT WELD	CARBON STEE	DWG.#475-D-3915 PFI ISO#3915-E-E(REPAIR)
2293	W73R	view 2-3	24" OD	.375"	"X"	BUTT WELD	CARBON STEE	DWG.#475-D-3922 PFI ISO#3922C-A-A(REPAIR)
2293	W73R	view 3-4	24" OD	.375"	"X"	BUTT WELD	CARBON STEE	DWG.#475-D-3922 PFI ISO#3922C-A-A(REPAIR)
2293	W73R	view 4-5	24" OD	.375"	"X"	BUTT WELD	CARBON STEE	DWG.#475-D-3922 PFI ISO#3922C-A-A(REPAIR)
2293	W73R	view 6-1	24" OD	.375"	"X"	BUTT WELD	CARBON STEE	DWG.#475-D-3922 PFI ISO#3922C-A-A(REPAIR)

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2468

DATE 02/26/2018 **TERMS** Net 30

DUE DATE 03/28/2018

PURCHASE ORDER
2293

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST Corval Magellan Piping @ Corpus Christi, TX - RT Report #1749 - 2/22/2018	4	92.00	368.00
Miscellaneous Charges:Per Diem	2	135.00	270.00
Miscellaneous Charges:Mileage	255	0.90	229.50
Miscellaneous Charges:NDE Truck	1	65.00	65.00
Radiographic Testing:2 Person Radiography Crew ST Corval Magellan Piping @ Corpus Christi - RT Report #1241 - 2/23/2018	8	92.00	736.00
Radiographic Testing:2 Person Radiography Crew OT	2	138.00	276.00
Radiographic Testing:Film:4.5x17 Inch Film Total of 5 film shot - 3 (Weld 103) film were re-shoots per Level III review and not billable	2	9.00	18.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:Per Diem	2	135.00	270.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00
Radiographic Testing:2 Person Radiography Crew OT Corval Magellan Piping @ Corpus Christi - RT Report #1097 - Saturday 2/24/2018	14	138.00	1,932.00
Radiographic Testing:Film:4.5x17 Inch Film Total of 38 Film Shot - Weld 93 view 2-3, Weld 92 all 3 views, Weld 2 all 6 views re-shoots per Level III review and not billable	28	9.00	252.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:Mileage	255	0.90	229.50
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE	$4,876.00

-1749

2602 Texas Avenue
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Fax (409) 948-0839
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RADIOGRAPHIC EXAMINATION REPORT

Page ____ of ____

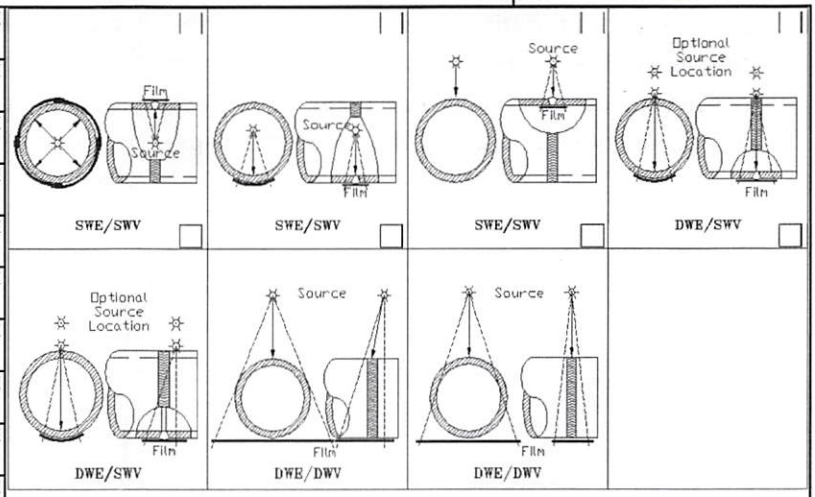
SC# ____

CUSTOMER/CONTACT Paragon C Magellan | DATE 2-22-18

LOCATION/ADDRESS Corpus Christi, TX

UNIT/SYSTEM CMPT 138 & 139 | P.O. 2293

	A	B	C	D	E
MATERIAL					
THICKNESS					
DIAMETER					
REINF. THICKNESS					
SFD					
EXPOSURE TIME					
IQI SIZE/MATERIAL					
IQI LOCATION (S/F)					
SHIM THK & MAT'L					
# OF EXPOSURES					
MARKERS: NBR OR SPACING					



SOURCE: [X] Ir [ ] Co [ ] X-Ray | 83 Ci | kV | Ma | FOCAL SPOT | SCREENS FRONT / REAR | FILM LOADING [ ] Single [ ] Double | FILM PROCESS: TIME / TEMP [ ] AUTO [ ] MANUAL

NDE PROCEDURE BI-RT-300-Rev 0 | ACCEPTANCE STANDARD | SURFACE CONDITION

STAGE OF MANUFACTURE [ ] INTERMEDIATE [ ] FINAL [ ] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS

Travel + Per-Diem

[ ] ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE | FILM BRAND/TYPE | TOTAL # OF WELDS 0

Date 2-22-18 | Customer Contact Roland M | Per Diem Yes [X] No [ ] | Report # 1749 | Unit # 12 | No. on Job 2

Travel if Applicable Hours: 4 hours Miles Total: 255 | Airlines [ ] Vehicle [X] | Hours: Worked 6pm to AM and to 10pm PM | Total Hrs 4hr

Mike Brines LVII / Lantrip T LVI

Signature of Customer's Representative certifies time and material correct | Name, Signature, and Level of Examiner | Assistant

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BLAZER INSPECTION, INC.
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RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 1

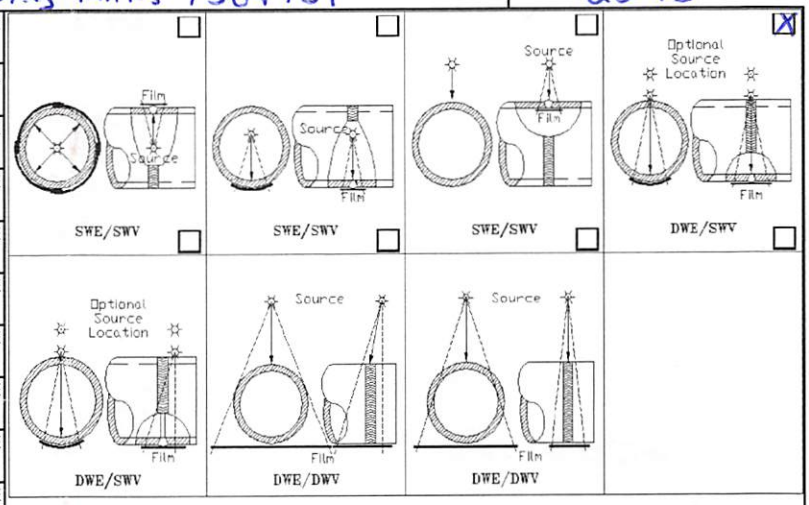
SC#

CUSTOMER/CONTACT Paragon C Magellan — DATE 2-23-18

LOCATION/ADDRESS Corpus Christi, TX

UNIT/SYSTEM Coral Magellan Piping Tank's 138+139 — P.O. 2293

	A	B	C	D	E
MATERIAL	C15	C15			
THICKNESS	.375	.375			
DIAMETER	~~18~~	8.625			
REINF. THICKNESS	.125	.125			
SFD	~~18~~	8.625			
EXPOSURE TIME	6min	1½min			
IQI SIZE/MATERIAL	B	B			
IQI LOCATION (S/F)	F	F			
SHIM THK & MAT'L	/	/			
# OF EXPOSURES	2	3			
MARKERS: NBR OR SPACING	~~1 5~~	9.03			



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS	FILM LOADING	FILM PROCESS
[X] Ir	83			.10x.11	Lead FRONT .010	[X] Single [ ] Double	Agfa
[ ] Co					REAR .010		TIME 68
[ ] X-Ray							TEMP 5min

NDE PROCEDURE: BI-FT-300-Rev 0 — ACCEPTANCE STANDARD: API-1104 — SURFACE CONDITION:

[ ] AUTO [X] MANUAL

STAGE OF MANUFACTURE: [ ] INTERMEDIATE [ ] FINAL [ ] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-63	3-4	2to4	2to4	✓			X C-3-18
W-64	3-4	2to4	2to4	✓			X C-3-18
W-103	1-2	2to4	2to4	✓			K 1-31-18
	2-3	"	"	✓			
	3-1	"	"	✓			

STAND BY MOST OF THE DAY!!! DIDN'T GET WELDS TILL 330pm

[ ] ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE 4½x17 5 — FILM BRAND/TYPE Agfa D-3 — TOTAL # OF WELDS 3

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
2-23-18	Roland, M	Yes [X] No [ ]	1741	12	2

Travel if Applicable Hours: ~~4~~ N/A Miles Total: ~~285~~ — Airlines [ ] Vehicle [X]

Hours: Worked 6:30 AM to AM and 4:30 to PM — Total Hrs 10 hrs

* Michael T Courtney
Signature of Customer's Representative certifies time and material correct

Mike Grimes LVII / Lantrip J LVI
Name, Signature, and Level of Examiner — Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

BLAZER INSPECTION, INC.
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Texas City, TX 77590
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Fax (409) 948-0839
www.blazerinspection.com

RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 2

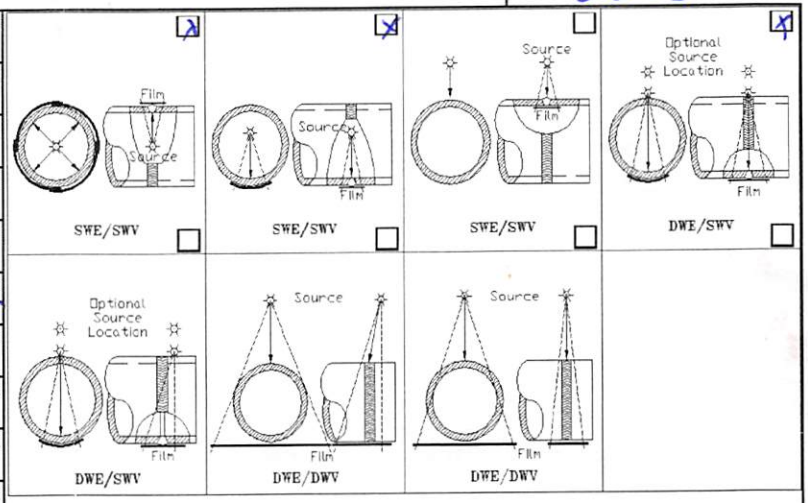
SC#

CUSTOMER/CONTACT Paragon & Magellan — DATE 2-24-18

LOCATION/ADDRESS Corpus Christi, TX

UNIT/SYSTEM CMPT - 138+139 — P.O. 2293

	A	B	C	D	E
MATERIAL	CS	CS	CS	CS	CS
THICKNESS	.375	.375	.322	.375	.375
DIAMETER	20"	18"	8"	~~24"~~	12"
REINF. THICKNESS	.125	.125	.125	.125	.125
SFD	9.5"	16.5"	8"	24"	12"
EXPOSURE TIME	3½ min	2.45 min	1½	10½	3 min
IQI SIZE/MATERIAL	B	B	B	B	B
IQI LOCATION (S/F)	F	F	F	F	F
SHIM THK & MAT'L					
# OF EXPOSURES	5	4	3	7	1
MARKERS: NBR OR SPACING	12:56	12:56	9:05	12:56	11:05



SOURCE: [X] Ir [ ] Co [ ] X-Ray — Ci: 83 — kV — Ma

FOCAL SPOT: .10 X .11 — SCREENS: lead — FRONT .010 REAR .010

FILM LOADING: [X] Single [ ] Double

FILM PROCESS: Agfa — TIME 4min/5min — TEMP 67 — [ ] AUTO [X] MANUAL

NDE PROCEDURE: BF-RT-300-Rev0 — ACCEPTANCE STANDARD: API-1104 — SURFACE CONDITION: AS Welded

STAGE OF MANUFACTURE: [ ] INTERMEDIATE [ ] FINAL [ ] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-31	1-2	2to4	2to4	✓			X 18"
	2-3	↓	↓	✓			↓
	3-4			✓			
	4-1			✓			
W-53	1-2			✓			X 20"
	2-3			✓			↓
	3-4			✓			
	4-5			✓			
	5-1			✓			
W-34	3-1			✓			K 12"
W-93	2-3			✓		FOR	E 20"
W-92	1-2			✓			X 8"
	2-3			✓			↓
	3-1			✓			

[ ] ADDITIONAL PAGES — COMMENTS:

OF FILM AND SIZE: 4½ x 17 (42) — FILM BRAND/TYPE: Agfa D3 — TOTAL # OF WELDS: 10

Date: 2-24-18 — Customer Contact: Michael / Roland — Per Diem: Yes [X] No [ ] — Report #: 1097 — Unit #: 12 — No. on Job: 2

Travel if Applicable — Hours: 4 hours — Miles Total: 255 — Airlines [ ] Vehicle [X] — Hours: Worked 6:30 AM to AM and to 8:30 PM — Total Hrs: 14hrs

Signature of Customer's Representative certifies time and material correct

Mike Grimes Lvl II / Lantrip J

Name, Signature, and Level of Examiner — Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

- ~~1021~~ 1097

2602 Texas Avenue
Texas City TX 77590
Office (409) 948-1012
Fax (409) 948-0839
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READER SHEET

Page 2 of 2

SC#

CUSTOMER/CONTACT Paragon @ Mgellan | DATE 2-24-18

LOCATION/ADDRESS Corpus Christi, TX

UNIT/SYSTEM CMPT - 138-139 | P.O. 7293

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-35	1-2	2 to 11	2 to 11	✓			X 20"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-1			✓			↓
W-113	1-2			✓			X 20"
	5-1			✓			↓
W-86	1-2			✓			X 20"
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-1			✓			↓
W-1	1-2			✓			24" X
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-6			✓			
	6-1			✓			
W-2	1-2			✓			
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-6			✓			
	6-1			✓			↓

X Michael T. Cates
Signature of Customer's Representative certifies time and material correct

Mike Grimes CWI / Lantrip. J
Name, Signature, and Level of Examiner — Assistant

Customer signature indicates satisfactory performance and agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file.

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2489

DATE 03/05/2018 TERMS Net 30

DUE DATE 04/04/2018

PURCHASE ORDER
2293-4691

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew OT @LaMarque, RT Report #1139, 3/3/2018	8	138.00	1,104.00
Radiographic Testing:Film:4.5x17 Inch Film	11	9.00	99.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $1,318.00

BLAZER INSPECTION, INC.
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RADIOGRAPHIC EXAMINATION REPORT

Page ____ of ____

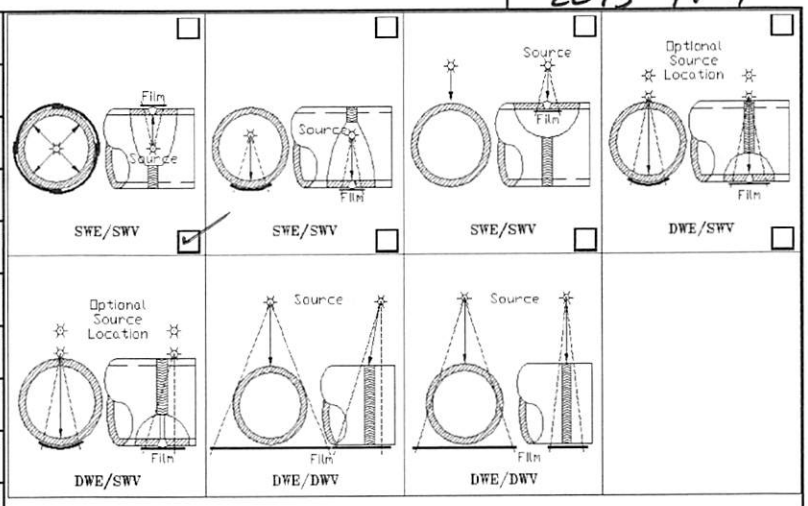
SC# ____

CUSTOMER/CONTACT PARAGON FAB | DATE 3-3-18

LOCATION/ADDRESS La Marque, TX

UNIT/SYSTEM | P.O. 2293-4691

	A	B	C	D	E
MATERIAL	C/S	C/S	C/S		
THICKNESS	STD	STD	STD		
DIAMETER	18"	12"	8"		
REINF. THICKNESS	.125	.125	.125		
SFD	18.5"	12.5"	8.5"		
EXPOSURE TIME	1:10m	4:15m	1:40m		
IQI SIZE/MATERIAL	B	B	B		
IQI LOCATION (S/F)	F	F	F		
SHIM THK & MAT'L					
# OF EXPOSURES	5	3	3		
MARKERS: NBR OR SPACING	11.30"	13.35	9.03		



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS	FILM LOADING	FILM PROCESS:
☑ Ir	68			.140	FRONT 0/0 LEAD REAR 0/0	☑ Single ☐ Double	TIME 4 min
☐ Co							TEMP 72°
☐ X-Ray							☑ AUTO ☑ MANUAL

NDE PROCEDURE: BI-RT-300 Rev.0 | ACCEPTANCE STANDARD: Api 1104 | SURFACE CONDITION: AS WELDED

STAGE OF MANUFACTURE: ☐ INTERMEDIATE ☑ FINAL ☐ REPAIR ☐ BEFORE PWHT ☐ AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-75	1-2	2.2	2.7	☑	☐		W/S "N"
	2-3	2.4	3	☑	☐		
	3-4	2.6	3.1	☑	☐		
	4-5	2.5	2.9	☑	☐	CAP Shadow	
	5-1	2.4	3.2	☑	☐	SLAG IN CODE	
				☐	☐		
W-79	1-2	2.2	2.9	☑	☐		W/S "X"
	2-3	2.7	3.3	☑	☐		
	3-1	2.5	3.1	☑	☐		
				☐	☐		
W-3	1-2	2.4	3.0	☑	☐		W/S "X"
	2-3	2.9	3.6	☑	☐		
	3-1	2.7	3.4	☑	☐		
				☐	☐		
				☐	☐		

☐ ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE: (11) 4½" X 17" | FILM BRAND/TYPE: AGFA D3 | TOTAL # OF WELDS: 3

Date: 3-3-18 | Customer Contact: Michael | Per Diem: Yes ☐ No ☑ | Report # | Unit #: 10 | No. on Job: 2

Travel if Applicable: Hours: Miles Total: | Airlines ☐ Vehicle ☑ | Hours: Worked to AM and to PM | Total Hrs: 8 HR

X Michael T. Courtney — Signature of Customer's Representative certifies time and material correct

Daniel Rhodes II — Name, Signature, and Level of Examiner

Joshua LaTrip — Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

RT-BI-001

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2490

DATE 03/05/2018 TERMS Net 30

DUE DATE 04/04/2018

PURCHASE ORDER
2293-4691

ACTIVITY	QTY	RATE	AMOUNT
Ultrasonic Testing:Thickness Surveys or Inspections:2 Person UT Thickness Crew OT @LaMarque, UT Report #332018-1, 3/3/2018	8	161.25	1,290.00
Ultrasonic Testing:Thickness Surveys or Inspections:Ultrasonic Thickness Meter	1	80.00	80.00
Consumables:UT Materials:Ultragel Tube Tube	1	10.00	10.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $1,445.00

BLAZER INSPECTION, INC.
2602 Texas Avenue
Texas City, TX 77590 Office
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ULTRASONIC EXAMINATION REPORT

Page 1 of 1

SC# 332018-1

CUSTOMER/CONTACT Paragon | DATE 3/3/2018

LOCATION/ADDRESS Texas City

UNIT/SYSTEM 475D-3916F | P.O. 2293-4691

ITEM DESCRIPTION 30" STD

MATERIAL	SIZE	QUANTITY	THICKNESS	SURFACE CONDITION
C/S	30"	1	.402	smooth

PROCEDURE BI UT 100 REV 0 | ACCEPTANCE STANDARD 31.3 | ITEM TEMP 80° | CAL BLOCK TEMP 80°

STAGE OF MANUFACTURE: ☐ INITIAL ☑ FINAL ☐ REPAIR | COMMENTS: | SURFACE PREPARATION: smooth

☑ LONGITUDINAL ☐ SHEAR WAVE ☐ OTHER | TYPE OF EXAM: UTT | COUPLANT: Ultragel

INSTRUMENT
MFG: Panametrics
MODEL: Epoch XT
S/N: 070129609

TRANSDUCER
MFG: Olympus
MODEL: A104S
S/N: 1108552
FREQ: 2.25 MHZ
SIZE: 1.0"
☑ SINGLE ☐ DUAL
WEDGE ANGLE: 0°
MEAS. ANGLE: 0°
DELAY: 0.000

CALIBRATION BLOCK ☑ FLAT ☐ CURVED | TYPE: DSC | MATERIAL: C/S | MFG.: 3E | S/N: 3E/BCB/CS/1"

COMMENTS INCLUDE ACCEPT/REJECT ☐ SKETCH ☐ ADDITIONAL PAGES

475D-3916E Thickness Readings

1.) .398
2.) .394
3.) 397
4.) 402
5.) .411
6.) .395
7.) .397

SENSITIVITY LEVEL	CAL TIME	INITIAL	INTERM	INTERM	FINAL
		7:45			

CONSUMABLES: COUPLANT GAL TUBE ☒ HIGH TEMP. NA

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
3/3/2018		Yes ☐ No ☑	1	NA	

Travel if Applicable Hours:	Miles Total	Airlines ☐ Vehicle ☑	Hours: Worked			Total Hours
NA	NA		to 7:00 AM	and	to 3:00 PM	8

Michael T. Courtney
Signature of Customer's Representative certifies time and material correct

Terry Eaglin LVL II
Name, Signature and Level of Examiner — Assistant

Customer signature indicates satisfactory performance & agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file

UT-BI-001

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2508

DATE 03/06/2018 TERMS Net 30

DUE DATE 04/05/2018

PURCHASE ORDER
2293

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @LaMarque, RT Report #2054, 3/5/2018	8	92.00	736.00
Radiographic Testing:Film:4.5x17 Inch Film	32	9.00	288.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $1,139.00

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Texas City, TX 77590
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Fax (409) 948-0839
www.blazerinspection.com

-2054

RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 2

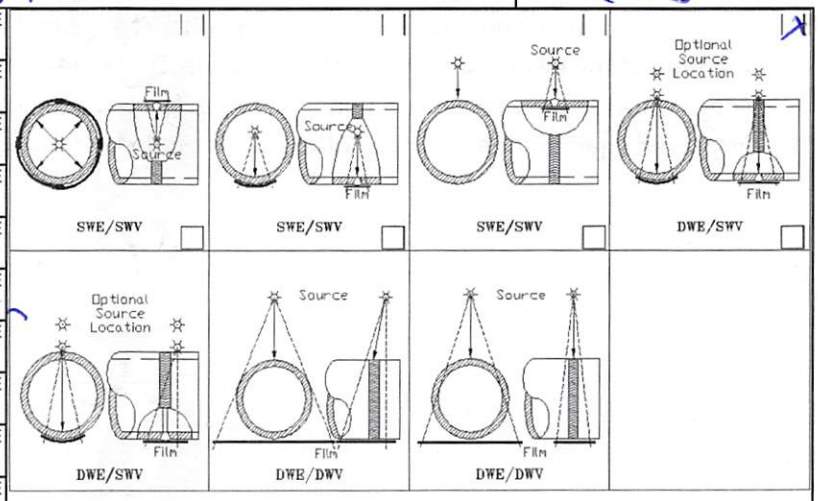
SC#

CUSTOMER/CONTACT Paragon | DATE 3-5-18

LOCATION/ADDRESS La Marque, TX

UNIT/SYSTEM CMPT- 138+139 | P.O. 2293

	A	B	C	D	E
MATERIAL	C1S	C1S	C1S	C1S	C1S
THICKNESS	STD	STD	STD	STD	STD
DIAMETER	18"	24"	12.75	8.750	20"
REINF. THICKNESS					
SFD	18"	24"	12.75	8.750	20"
EXPOSURE TIME	19min	35min	10min	360	24m
IQI SIZE/MATERIAL	B	B	B	B	B
IQI LOCATION (S/F)	F	F	F	F	F
SHIM THK & MAT'L					
# OF EXPOSURES	4	5	3	3	5
MARKERS: NBR OR SPACING	12.56	12.56	11.03	9.03	12.56



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS	FILM LOADING	FILM PROCESS: Agfa
[X] Ir	30			.10x.11	FRONT .010 lead	[X] Single [ ] Double	TIME 5
[ ] Co					REAR .010		TEMP 70°
[ ] X-Ray							[ ] AUTO [X] MANUAL

NDE PROCEDURE RT-RTF300-REV0 | ACCEPTANCE STANDARD API-1104 | SURFACE CONDITION AS Weld

STAGE OF MANUFACTURE [ ] INTERMEDIATE [ ] FINAL [ ] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
FW-62	1-2	2to4	2to4	✓		18"	N
	2-3			✓			
	3-4			✓			
	4-1			✓			
FW-3	1-2			✓		24"	N
	2-3			✓			
	3-4			✓			
	4-5			✓		NF .645 INCONE	
	5-1			✓		NF .645 INCONE	> same indication.
FW-79	1-2			✓		12"	X
	2-3			✓			
	3-1			✓			
FW-83	1-2			✓		12"	X
	2-3			✓			
	3-1			✓			

[ ] ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE 4½x17 (32) | FILM BRAND/TYPE Agfa D-3 | TOTAL # OF WELDS 8

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
3-5-18	Mike	Yes [ ] No [X]	2054	12	

Travel if Applicable: Hours: N/A Miles Total: N/A | Airlines [ ] Vehicle [X]

Hours: Worked 8A.M. to AM and to 4p.M. PM | Total Hrs 8hr

Signature of Customer's Representative certifies time and material correct

Grimes, Mike LVII / Lantrip, J

Name, Signature, and Level of Examiner — Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

RT-BI-001

Acknowledgement:

The test results reported herein by the inspection technician are valid at the time of inspection only. Blazer Inspection, Inc. is not responsible for any changes in the state of the equipment after the inspection is completed including but not limited to: final installation practices, mechanical controls, operations or utilization parameters, or any other change in the state of the equipment from its state at the time of the inspection; and, makes no assertion, finding, representation, guarantee or warranty concerning the possible effects upon the inspected equipment from such changes, or the state of such inspected equipment at any time after the inspection is completed.

#-1026
2054

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Page 2 of 2

SC# _____

CUSTOMER/CONTACT Paragon | DATE 3-5-18

LOCATION/ADDRESS La Marque TX

UNIT/SYSTEM CMPT- 138 & 139 | P.O. 2293

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
FW-66	1-2	2 roll	2 roll	☑	☐	12" CP INCOR	X
	2-3	↓	↓	☑	☐	↓	↓
	3-1			☑	☐		
FW-89	1-2			☐	☒	12" POR/Slag	J
	2-3			☑	☐	↓ CP INCOR	↓
	3-1			☑	☐	[illegible]	
FW-88	1-2			☑	☐	20"	J
	2-3			☑	☐		
	3-4			☐	☒	POR/Slag	
	4-5			☐	☒	POR/Slag	
	5-1			☑	☐	↓	↓
W-110	1-2			☑	☐	IF/NF .492" 6"	N
	2-3			☑	☐		
	3-1			☑	☐	IF/NF .698" ↓	↓

Signature of Customer's Representative certifies time and material correct

Mike Grimes Level 2 Trip J
Name, Signature, and Level of Examiner — Assistant

Customer signature indicates satisfactory performance and agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file.

Blazer Inspection, Inc.
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Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2510

DATE 03/07/2018 TERMS Net 30

DUE DATE 04/06/2018

PURCHASE ORDER
2293-4691

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @LaMarque, RT Report #1645, 3/6/2018	7	92.00	644.00
Radiographic Testing:Film:4.5x17 Inch Film	28	9.00	252.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $1,011.00

-1645

2602 Texas Avenue
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RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 2

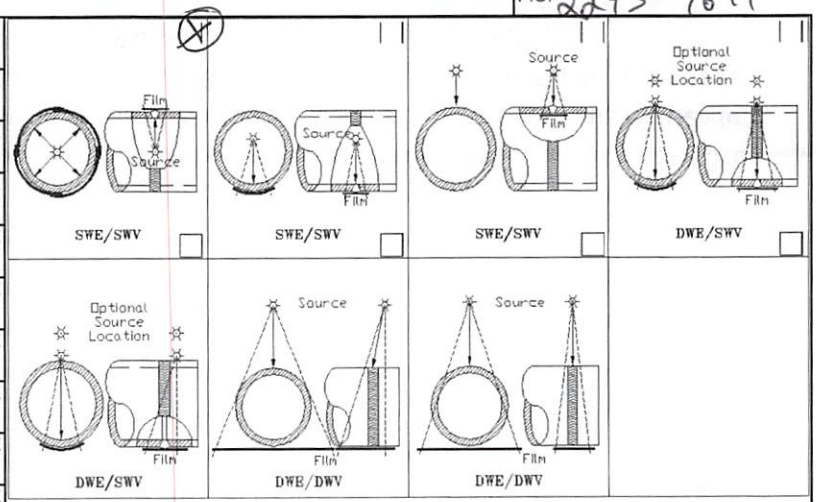
SC# _____

CUSTOMER/CONTACT PFI | DATE 3-6-18

LOCATION/ADDRESS LA MARQUE

UNIT/SYSTEM | P.O. 2293-4691

	A	B	C	D	E
MATERIAL	CS				
THICKNESS	STD				
DIAMETER	24"				
REINF. THICKNESS	—				
SFD	12"				
EXPOSURE TIME	2M30S				
IQI SIZE/MATERIAL	B				
IQI LOCATION (S/F)	F				
SHIM THK & MAT'L	—				
# OF EXPOSURES					
MARKERS: NBR OR SPACING	#3				



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS		FILM LOADING	FILM PROCESS:
[X] Ir	46			.10 X .11	FRONT	.005	[X] Single [ ] Double	TIME 4M
[ ] Co					REAR	.005		TEMP 69°
[ ] X-Ray								[ ] AUTO [X] MANUAL

NDE PROCEDURE: BI-RT-300-REV0 | ACCEPTANCE STANDARD | SURFACE CONDITION: AS WELDED

STAGE OF MANUFACTURE: [ ] INTERMEDIATE [X] FINAL [ ] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK, CP - CLUSTER POROSITY, IP - INSUFFICIENT PENETRATION, EU - EXTERNAL UNDERCUT, SU - SURFACE
SL - SLAG, P - POROSITY/GAS POCKET, IF - INSUFFICIENT FUSION, IU - INTERNAL UNDERCUT, HL - IP DUE TO HIGH/LOW
T - TUNGSTEN, HB - HOLLOW BEAD, EP - EXCESSIVE PENETRATION, IC - INTERNAL CONCAVITY, BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-10	1-2			✓			(X) (J)
38015-1D-D-B	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-6			✓			
	6-4			✓			
W-44	1-2			✓			
3917C-AA-B	2-3			✓			(X) 7
	3-4			✓			
	4-5			✓			
	5-6				✓	POROSITY	POROSI+
	6-1			✓		S46/POROSITY IN CODE	

[ ] ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE: (28) 4 1/2 X 17 | FILM BRAND/TYPE: AGFA D3 | TOTAL # OF WELDS

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
3-6-18	JUSTIN MORRIS	Yes [ ] No [X]	1645	11	2

Travel if Applicable		Airlines	Hours:						Total Hrs
Hours:	Miles Total:	Vehicle [X]	Worked	12P	to	7P	AM and	to	PM	7

AARON MARTELLI

Michael T. Courtney — Aaron Martelli LVL II — DANIEL BECKNAM LVL II

Signature of Customer's Representative certifies time and material correct | Name, Signature, and Level of Examiner | Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

RT-BI-001

Acknowledgement:

The test results reported herein by the inspection technician are valid at the time of inspection only. Blazer Inspection, Inc. is not responsible for any changes in the state of the equipment after the inspection is completed including but not limited to: final installation practices, mechanical controls, operations or utilization parameters, or any other change in the state of the equipment from its state at the time of the inspection; and, makes no assertion, finding, representation, guarantee or warranty concerning the possible effects upon the inspected equipment from such changes, or the state of such inspected equipment at any time after the inspection is completed.

- 1201

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READER SHEET

Page 2 of 2

SC#

CUSTOMER/CONTACT PFI

DATE 3-6-18

LOCATION/ADDRESS LA MARQUZ

UNIT/SYSTEM

P.O.

C - CRACK, SL - SLAG, T - TUNGSTEN, CP - CLUSTER POROSITY, P - POROSITY/GAS POCKET, HB - HOLLOW BEAD, IP - INSUFFICIENT PENETRATION, IF - INSUFFICIENT FUSION, EP - EXCESSIVE PENETRATION, EU - EXTERNAL UNDERCUT, IU - INTERNAL UNDERCUT, IC - INTERNAL CONCAVITY, SU - SURFACE, HL - IP DUE TO HIGH/LOW, BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-11	1-2			☐	☐	RESHOOT FILM	(X)
3801S-CC-A	2-3			☑	☐	SCRATCH ON FILM	
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☐	☐	RESHOOT FILM	
W-12	1-2			☑	☐		(N)
3801S-C-C-A	2-3			☐	☐	SHADOW 1" 20	
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-1			☑	☐		
				☐	☐		
REPAIRS				☐	☐		
W-88R	3-4			☐	☒	WORM HOLE POROSITY	(J)
A 712998	4-5			☑	☐		
				☐	☐		
W-89R	1-2			☐	☒		(J)
A 712998	3-1			☑	☐	WORM HOLE POROSITY	
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
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				☐	☐		
				☐	☐		

AARON MARTELLI

Signature of Customer's Representative certifies time and material correct

Aaron Martelli LVL II

Name, Signature, and Level of Examiner

DANIEL BECKHAM LVL II

Assistant

Customer signature indicates satisfactory performance and agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file.

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2515

DATE 03/08/2018 TERMS Net 30

DUE DATE 04/07/2018

PURCHASE ORDER
2293-4691

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @LaMarque, RT Report #1526, 3/7/2018	7	92.00	644.00
Radiographic Testing:Film:4.5x17 Inch Film	8	9.00	72.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $831.00

BLAZER INSPECTION, INC.
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RADIOGRAPHIC EXAMINATION REPORT

-1526

Page 1 of 1

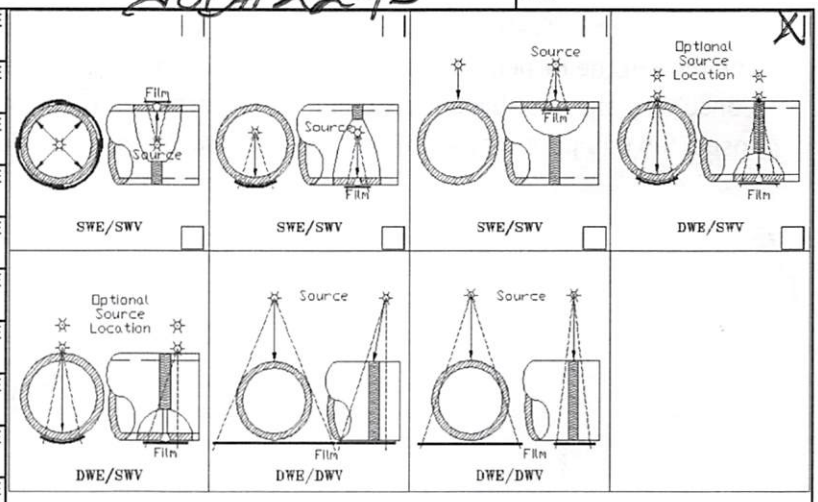
SC#

CUSTOMER/CONTACT Parogon — DATE 3-7-18

LOCATION/ADDRESS LaMacque Shop

UNIT/SYSTEM — JOB#2293 — P.O.

	A	B	C	D	E
MATERIAL	CS				
THICKNESS	SCH 40				
DIAMETER	16"				
REINF. THICKNESS	.125"				
SFD	16.125"				
EXPOSURE TIME	4.30				
IQI SIZE/MATERIAL	B				
IQI LOCATION (S/F)	F				
SHIM THK & MAT'L	NA				
# OF EXPOSURES	4				
MARKERS: NBR OR SPACING	12.56"				



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS		FILM LOADING	FILM PROCESS: AGFA
[X] Ir	73			.10x.1	lead	FRONT .005	[X] Single [ ] Double	TIME 6
[ ] Co						REAR .005		TEMP 68
[ ] X-Ray	NDE PROCEDURE: BIRT300REV0			ACCEPTANCE STANDARD: API 1104			SURFACE CONDITION: As Welded	[ ] AUTO [X] MANUAL

STAGE OF MANUFACTURE [ ] INTERMEDIATE [X] FINAL [ ] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID, OTHER ID - REMARKS
72	1-2			✓		Slag .250 InCode.	N
1	2-3			✓		1 - .375, .625 InCode	1
	3-4			✓			
	4-1			✓			

[ ] ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE (8) 4.5" x 17" — FILM BRAND/TYPE AGFA D-3 — TOTAL # OF WELDS 9

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
3-7-18	Mike	Yes [ ] No [X]	1526	8	2

Travel if Applicable Hours: 1 Miles Total: 15 — Airlines [ ] Vehicle [X] — Hours: Worked to 730 AM and to 230 PM — Total Hrs 7HRS.

Michael Courtney — Signature of Customer's Representative certifies time and material correct

Erik Ecklands Erik Eacles LVII — Name, Signature, and Level of Examiner

Justin Vallado — Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

Acknowledgement:

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409-948-1012
jspruiell@blazerinspection.com
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BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2516

DATE 03/09/2018 TERMS Net 30

DUE DATE 04/08/2018

PURCHASE ORDER
2293-4639

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @LaMarque, RT Report #1527, 3/8/2018	8	92.00	736.00
Radiographic Testing:2 Person Radiography Crew OT	3	138.00	414.00
Radiographic Testing:Film:4.5x17 Inch Film	34	9.00	306.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE $1,571.00

BLAZER INSPECTION, INC.
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RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 2

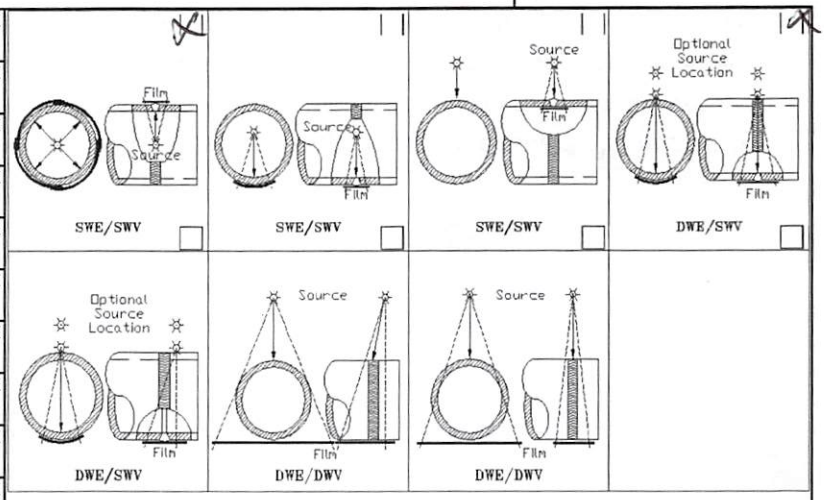
SC# 1527

CUSTOMER/CONTACT Paragon — DATE March 8th 2018

LOCATION/ADDRESS La Marque, Texas — Job# 2293-4639

UNIT/SYSTEM — P.O.

	A	B	C	D	E
MATERIAL	C/S	C/S	C/S	C/S	
THICKNESS	.375	.375	STD	STD	
DIAMETER	16"	18"	30"	24"	
REINF. THICKNESS	.125	.125	.125	.125	
SFD	16"	18"	15	11.50	
EXPOSURE TIME	5:30	6:30	2:35	1:45	
IQI SIZE/MATERIAL	Bwire	Bwire	Bwire	Bwire	
IQI LOCATION (S/F)	F	F	F	F	
SHIM THK & MAT'L	N/A	N/A	N/A	N/A	
# OF EXPOSURES	8	12	7	12	
MARKERS: NBR OR SPACING	1-2-3 4-1	1-2-3 4-1	1-2-3 4-5-6	1-2-3-4 5-6-1	



SOURCE: [X] Ir [ ] Co [ ] X-Ray — Ci: 68 — kV — Ma — FOCAL SPOT: .10X.11 — SCREENS: FRONT .005 REAR .005 — FILM LOADING: [X] Single [ ] Double — FILM PROCESS: TIME 5 MIN TEMP 72°F [ ] AUTO [X] MANUAL

NDE PROCEDURE: BI-RT-300-REV.0 — ACCEPTANCE STANDARD — SURFACE CONDITION

STAGE OF MANUFACTURE: [ ] INTERMEDIATE [X] FINAL [ ] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W# 44 R	5-6			✓			"X" BP48NE204
W# 75	1-2			✓		Shadow in Code	"X" SF48149
	2-3			✓			
	3-4			✓			
	4-5			✓			
	5-6			✓			
	6-1			✓			
W# 25	1-2			✓			"H" SF68448
	2-3			✓			
	3-4			✓			
	4-5				✓	PER. out of Code	
	5-6			✓			
	6-7			✓			
	7-1						

[X] ADDITIONAL PAGES — COMMENTS: TIC 1222

OF FILM AND SIZE: 34 (4.5 x 17") D3 — FILM BRAND/TYPE: AGFA D3 — TOTAL # OF WELDS: 17

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
03/8/18	MIKE	Yes [ ] No [X]	1527	8	2

Travel if Applicable — Hours: 1 — Miles Total: 15 — Airlines [ ] — Vehicle [X]

Hours: Worked 730 to AM and to 630 PM — Total Hrs 11 HRS.

Signature of Customer's Representative certifies time and material correct

Eric Earl Cox — Name, Signature, and Level of Examiner

Kory Taylor — Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

Acknowledgement:

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SEE TICKET #1527

- 1222

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READER SHEET

Page 2 of 2

SC# _____

CUSTOMER/CONTACT Paragon | DATE 03/08/18

LOCATION/ADDRESS LaMarque, Texas | Job# 2293-4639

UNIT/SYSTEM | P.O.

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W# 26	1-2			☑	☐	Per. in Code	SF68448 "H"
	2-3			☑	☐		
	3-4			☐	☑	Per. out of Code	
	4-1			☑	☐		
				☑	☐		
W# 69	1-2			☑	☐	Cluster in Code	SREJ3 "X"
	2-3			☑	☐	PER in Code	
	3-4			☑	☐		
	4-1			☑	☐		
				☐	☐		
W# 70	1-2			☑	☐		
	2-3			☑	☐	PER. in Code	"X" SREJ3
	3-4			☑	☐		
	4-1			☑	☐		
				☐	☐		
W# 82	1-2			☑	☐	PER. 075 in Code	SF48149 "H"
	2-3			☑	☐		
	3-4			☑	☐		
	4-1			☑	☐		
				☐	☐		
W# 83	1-2			☑	☐		SF48149 "H"
	2-3			☐	☑	PER out of Code	S
	3-4			☑	☐		
	4-1			☑	☐		

X _____
Signature of Customer's Representative certifies time and material correct

Eric Earls III
Name, Signature, and Level of Examiner

Kory Taylor
Assistant

Customer signature indicates satisfactory performance and agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file.

Blazer Inspection, Inc.
2602 Texas Ave.
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409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2525

DATE 03/15/2018 **TERMS** Net 30

DUE DATE 04/14/2018

PURCHASE ORDER
2293

ACTIVITY	QTY	RATE	AMOUNT
Radiographic Testing:2 Person Radiography Crew ST @ La Marque Shop - RT Report #2062 - 3/9/2018	6	92.00	552.00
Radiographic Testing:Film:4.5x17 Inch Film	15	9.00	135.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00
Radiographic Testing:2 Person Radiography Crew ST @ La Marque Shop - RT Report #2058 - 3/12/2018	8	92.00	736.00
Radiographic Testing:Film:4.5x17 Inch Film	27	9.00	243.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00
Radiographic Testing:2 Person Radiography Crew ST Crew #1 @ La Marque Shop - RT Report #1549 - 3/14/2018	5	92.00	460.00
Radiographic Testing:Film:4.5x17 Inch Film	13	9.00	117.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00
Radiographic Testing:2 Person Radiography Crew ST Crew #2 @ La Marque Shop - RT Report #1654, 1655, 1656 - 3/14/2018	6	92.00	552.00
Radiographic Testing:Film:4.5x17 Inch Film	27	9.00	243.00
Miscellaneous Charges:Equipment Charge	1	50.00	50.00
Miscellaneous Charges:NDE Truck	1	65.00	65.00

TOTAL DUE **$3,498.00**

-2062

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Texas City, TX 77590
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RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 2

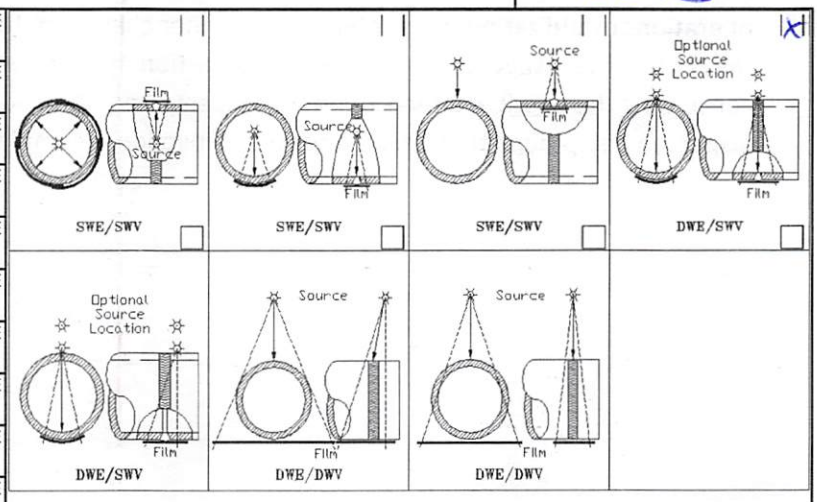
SC#

CUSTOMER/CONTACT Peragon — DATE 3-9-18

LOCATION/ADDRESS La Marque, TX

UNIT/SYSTEM CMPT-138 & 139 — P.O. 2293

	A	B	C	D	E
MATERIAL	C1S	C1S	C1S	C1S	
THICKNESS	.375	.375	.375	.375	
DIAMETER	18"	24"	16"	12"	
REINF. THICKNESS	/	/	/	/	
SFD	18"	24"	16"	12"	
EXPOSURE TIME	9min	18min	7min	3min	
IQI SIZE/MATERIAL	B	B	B	B	
IQI LOCATION (S/F)	F	F	F	F	
SHIM THK & MAT'L	/	/	/	/	
# OF EXPOSURES	4	6	4	3	
MARKERS: NBR OR SPACING	12.56	12.56	12.56	11.03	



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS		FILM LOADING	FILM PROCESS:
[X] Ir	83			.10x.11	Lead	FRONT .010	[X] Single [ ] Double	AGFA
[ ] Co						REAR .010		TIME 5
[ ] X-Ray								TEMP 68

NDE PROCEDURE: RT-300.Rev0 — ACCEPTANCE STANDARD: API-1104 — SURFACE CONDITION: AS WELDED — [ ] AUTO [X] MANUAL

STAGE OF MANUFACTURE: [ ] INTERMEDIATE [ ] FINAL [ ] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-46	1-2	2 to 4	2 to 4	/		18"	N/H
	2-3			/			
	3-4			/			
	4-1			/			
W-88R2	1-2			/		EJ INCOR 12"	JV
W-88R2	4-5			/		24"	JV
W-45	1-2			/		24"	N/H
	2-3			/			
	3-4				X	IP/IOP	
	4-5				X	POR	
	5-6			/			
	6-1			/			
W-83R	~~1-2~~					16"	~~X~~
	2-3			/		2-3 only	X
	~~3-4~~						X

[ ] ADDITIONAL PAGES — COMMENTS:

OF FILM AND SIZE 4/2x17 (15) — FILM BRAND/TYPE AgfaD3 — TOTAL # OF WELDS 5

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
3-9-18	Justin Morris	Yes [ ] No [X]	2062	12	2

Travel if Applicable Hours: N/A Miles Total: N/A — Airlines [ ] Vehicle [X] — Hours: Worked 12pm AM and to 6 PM — Total Hrs 6hrs

Mike Grimes LVII — Rales PLVII

Signature of Customer's Representative certifies time and material correct — Name, Signature, and Level of Examiner — Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

RT-BI-001

Acknowledgement:

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-2058

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RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 2

SC#

CUSTOMER/CONTACT Parsons

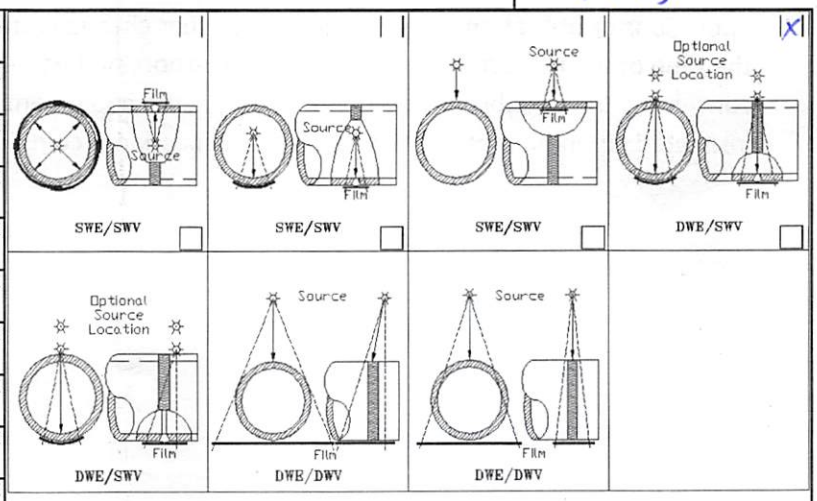
DATE 3-17-18

LOCATION/ADDRESS LaMarque, TX

UNIT/SYSTEM CMPT 138+139

P.O. 7793

	A	B	C	D	E
MATERIAL	CS	CS	CS		
THICKNESS	.375	.375	.375		
DIAMETER	24	18"	12"		
REINF. THICKNESS					
SFD	24"	18"	12"		
EXPOSURE TIME	7min	3½	2min		
IQI SIZE/MATERIAL	B	B	B		
IQI LOCATION (S/F)	~~B~~	F	F		
SHIM THK & MAT'L					
# OF EXPOSURES	6	4	3		
MARKERS: NBR OR SPACING	12-56	12-56	11-05		



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS	FILM LOADING	FILM PROCESS: Agfa
[X] Ir	70			.10x.11	FRONT .010 Lead	[X] Single [ ] Double	TIME 5
[ ] Co					REAR .010		TEMP 70
[ ] X-Ray							[ ] AUTO [X] MANUAL

NDE PROCEDURE BI-RT-300-Rev0 | ACCEPTANCE STANDARD API-1104 | SURFACE CONDITION AS Welded

STAGE OF MANUFACTURE [ ] INTERMEDIATE [ ] FINAL [ ] REPAIR [ ] BEFORE PWHT [ ] AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-45R	3-4	2to4	2to4	✓		COF INCODE	N
	4-5	"	"	✓		CUST FOR INCOD	"
W-101A	1-2	"	"	✓			"
	2-3	"	"	✓			"
	3-4	"	"	✓			"
	4-5	"	"	✓			"
	5-6	"	"	✓			"
	6-1	"	"	✓			K
W-31	1-2	"	"	✓			K
	2-3	"	"	✓			"
	3-4	"	"	✓			"
	4-1	"	"	✓			K
W-27	1-2	"	"	✓			N
	2-3	"	"	✓			"
	3-1	"	"	✓			"

[ ] ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE 41/2x17 (27) | FILM BRAND/TYPE AgFa D-3 | TOTAL # OF WELDS 26

Date 3-17-18 | Customer Contact HAL | Per Diem Yes [ ] No [X] | Report # 24058 | Unit # 12 | No. on Job 2

Travel if Applicable Hours: N/A Miles Total: N/A | Airlines [ ] Vehicle [✓] | Hours: Worked 4pm to AM and to 12 PM | Total Hrs 8h

Signature of Customer's Representative certifies time and material correct

Name, Signature, and Level of Examiner: M. Grimes LVL II / Lantrip. J (Assistant)

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

RT-BI-001

Acknowledgement:

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- ~~1030~~ 2058

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Fax (409) 948-0839
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READER SHEET

Page 2 of 2

SC#

CUSTOMER/CONTACT Paragon

DATE 3-12-18

LOCATION/ADDRESS La Marque TX

UNIT/SYSTEM CMPT-138 + 139

P.O. 2293

C - CRACK
SL - SLAG
T - TUNGSTEN
CP - CLUSTER POROSITY
P - POROSITY/GAS POCKET
HB - HOLLOW BEAD
IP - INSUFFICIENT PENETRATION
IF - INSUFFICIENT FUSION
EP - EXCESSIVE PENETRATION
EU - EXTERNAL UNDERCUT
IU - INTERNAL UNDERCUT
IC - INTERNAL CONCAVITY
SU - SURFACE
HL - IP DUE TO HIGH/LOW
BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W 30	1-2	2+@4	2+@4	☑	☐		K
	2-3			☑	☐		
	3-4			☑	☐		
	4-1			☑	☐		
W 28	1-2			☑	☐		K
	2-3			☑	☐		
	3-4			☑	☐		
	4-1			☑	☐		

Signature of Customer's Representative certifies time and material correct

Mike Grimes LvII / Lantrip J
Name, Signature, and Level of Examiner — Assistant

Customer signature indicates satisfactory performance and agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file.

#-1549

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RADIOGRAPHIC EXAMINATION REPORT

Page ____ of ____

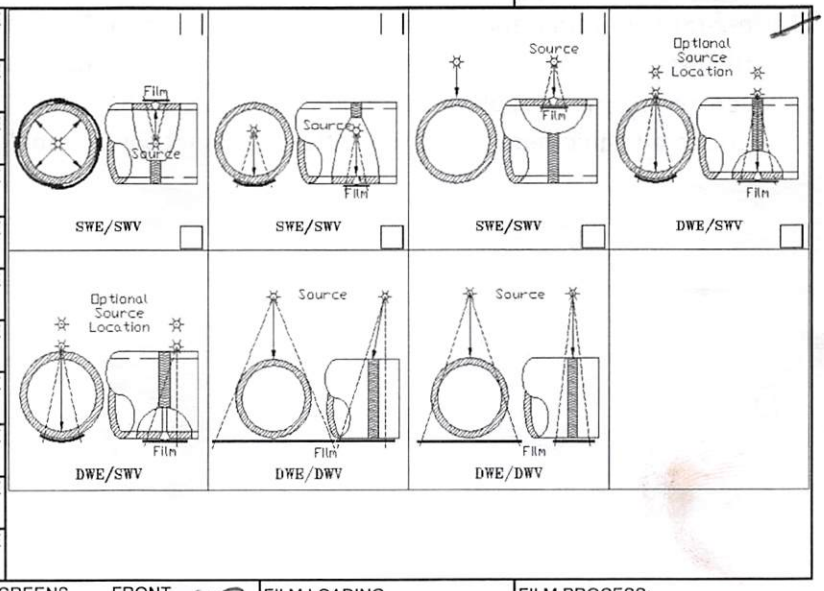
SC# ____

CUSTOMER/CONTACT PARAGON | DATE 3/14/18

LOCATION/ADDRESS CAMARGO TX

UNIT/SYSTEM | P.O.

	A	B	C	D	E
MATERIAL	CS				
THICKNESS	40				
DIAMETER	30				
REINF. THICKNESS	1/2				
SFD	30.5				
EXPOSURE TIME					
IQI SIZE/MATERIAL	B				
IQI LOCATION (S/F)	F				
SHIM THK & MAT'L	N/A				
# OF EXPOSURES					
MARKERS: NBR OR SPACING	1246	1265			



SOURCE: ☒ Ir ☐ Co ☐ X-Ray | Ci 100 | kV | Ma | FOCAL SPOT .10 x .11 | SCREENS FRONT .005 REAR .005 | FILM LOADING ☒ Single ☐ Double | FILM PROCESS: TIME | TEMP ☐ AUTO ☑ MANUAL

NDE PROCEDURE BRT-300Rev0 | ACCEPTANCE STANDARD | SURFACE CONDITION AS welded

STAGE OF MANUFACTURE ☐ INTERMEDIATE ☑ FINAL ☐ REPAIR ☐ BEFORE PWHT ☐ AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
SE68446 W24				☐	☐		X/R
	1-2			☑	☐		
	2-3			☑	☐		
	3-4			☑	☐	Pos w/ tr code	
	4-5			☑	☐		
	5-6			☑	☐		
	6-7			☑	☐		
	7-1			☑	☐		
719302 W102B				☐	☐		
	1-2			☑	☐	SWEF w/ tr code	R/W
	2-3			☑	☐		
	3-4			☑	☐	[illegible]	
	4-5			☑	☐	UC w/ tr code	
	5-6			☑	☐		
	6-1			☑	☐		

☐ ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE 4 5x17 | FILM BRAND/TYPE AGFA D3 | TOTAL # OF WELDS

Date 3.14.18 | Customer Contact | Per Diem Yes ☐ No ☑ | Report # 1549 | Unit # | No. on Job 2

Travel if Applicable Hours: Miles Total: | Airlines ☐ Vehicle ☑ | Hours: Worked to 7:00 AM and to 12:00 PM | Total Hrs 5

Signature of Customer's Representative certifies time and material correct

A Cuevas CWI | J. Mallado

Name, Signature, and Level of Examiner | Assistant

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

RT-BI-001

Acknowledgement:

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-1654

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RADIOGRAPHIC EXAMINATION REPORT

Page 1 of

SC#

CUSTOMER/CONTACT PFI

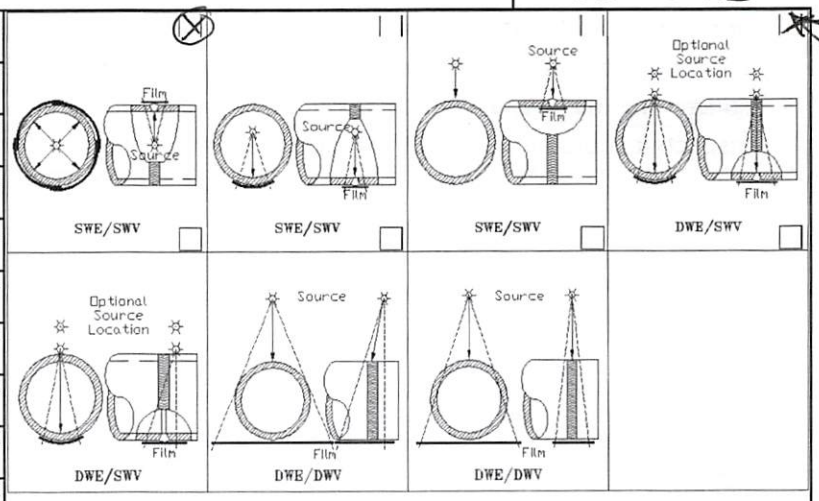
DATE 3-14-18

LOCATION/ADDRESS LA MARQUE

UNIT/SYSTEM 3916F SF6846

P.O. Job # 2293

	A	B	C	D	E
MATERIAL	C/S	C/S	C/S		
THICKNESS	.375"	.375"	.375"		
DIAMETER	18"	30"	24"		
REINF. THICKNESS	—	—	—		
SFD	18"	14.5"	11.5"		
EXPOSURE TIME	10m45s	4m30s	2m55s		
IQI SIZE/MATERIAL	B	B	B		
IQI LOCATION (S/F)	F	F	F		
SHIM THK & MAT'L	—	—	—		
# OF EXPOSURES	1	3	~~2~~		
MARKERS: NBR OR SPACING					



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS	FILM LOADING	FILM PROCESS
☒ Ir ☐ Co ☐ X-Ray	45			.10x.11	FRONT .005 REAR .005	☒ Single ☐ Double	TIME 4m TEMP 69° ☐ AUTO ☒ MANUAL

NDE PROCEDURE: BI-RT-300 Rev 0 | ACCEPTANCE STANDARD: API 1104 | SURFACE CONDITION: AS WELDED

STAGE OF MANUFACTURE: ☐ INTERMEDIATE ☒ FINAL ☐ REPAIR ☐ BEFORE PWHT ☐ AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-14	1-2	2.0	4.0	☑	☐		R/N
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-7			☑	☐		
	7-8			☑	☐		
	8-1			☑	☐		
W-15	1-2			☑	☐		R/N
	2-3			☑	☐		
	3-4			☑	☐		
	4-5			☑	☐		
	5-6			☑	☐		
	6-7			☑	☐		
	7-8			☑	☐		
☐ ADDITIONAL PAGES	B-1	COMMENTS:		☑	☐		

OF FILM AND SIZE: (17) 4.5 x 17

FILM BRAND/TYPE: AGFA D3

TOTAL # OF WELDS: 2

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
3-14-18		Yes ☐ No ☒	1654	11	2

Travel if Applicable — Hours: Miles Total: — Airlines ☐ Vehicle ☐

Hours: Worked 3p to 5p AM and to PM — Total Hrs 2

AARON MARTELLI

Signature of Customer's Representative certifies time and material correct — Name, Signature, and Level of Examiner: Aaron Martelli LVL II — Assistant: KORY TAYLOR

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

Acknowledgement:

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#1655

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RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 1

SC#

CUSTOMER/CONTACT PFI

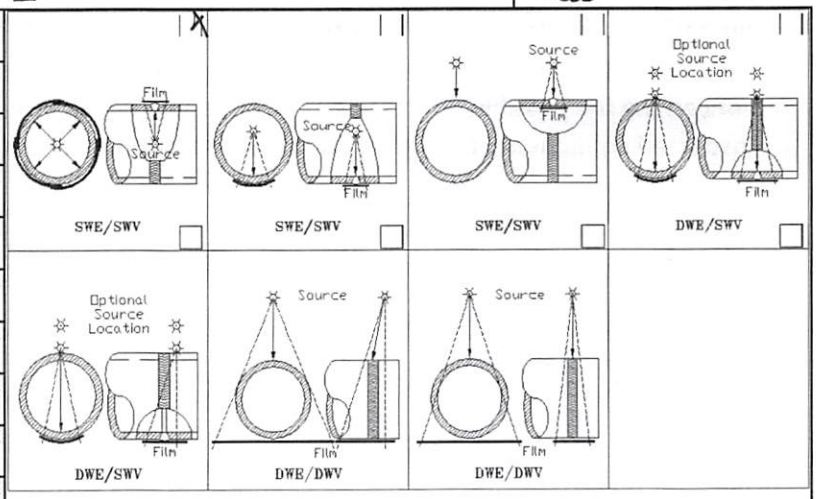
DATE 3-14-18

LOCATION/ADDRESS LA MARQUE

UNIT/SYSTEM 783M59 3915E-E

P.O. Job# 2293

	A	B	C	D	E
MATERIAL	C/S				
THICKNESS	.375				
DIAMETER	24"				
REINF. THICKNESS	—				
SFD	11.5				
EXPOSURE TIME	2m55s				
IQI SIZE/MATERIAL	B				
IQI LOCATION (S/F)	F				
SHIM THK & MAT'L	—				
# OF EXPOSURES	3				
MARKERS: NBR OR SPACING					



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS	FILM LOADING	FILM PROCESS:
☒ Ir ☐ Co ☐ X-Ray	45			.10x.11	FRONT .005 REAR .005	☒ Single ☐ Double	TIME

NDE PROCEDURE: BI-RT-300 Rev 0

ACCEPTANCE STANDARD: API-1104

SURFACE CONDITION: AS WELDED

TEMP ☐ AUTO ☐ MANUAL

STAGE OF MANUFACTURE ☐ INTERMEDIATE ☒ FINAL ☐ REPAIR ☐ BEFORE PWHT ☐ AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-1	1-2	2.0	-4.0	☑	☐		(X, N, IR)
	2-3	|	|	☑	☐		
	3-4	|	|	☑	☐		
	4-5	|	|	☑	☐		
	5-6	|	|	☑	☐		
	6-1	2.0	-4.0	☑	☐		

☐ ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE (7) 4.5 x 17

FILM BRAND/TYPE AGFA D3

TOTAL # OF WELDS 1

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
3-14-18		Yes ☐ No ☒	1655	11	2

Travel if Applicable — Hours: Miles Total: — Airlines ☐ Vehicle ☐

Hours: Worked 5p to 7p AM and to PM — Total Hrs 2

AARON MARTELLI

Signature of Customer's Representative certifies time and material correct

Name, Signature, and Level of Examiner: LVL II

Assistant: KORY TAYLOR

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

RT-BI-001

Acknowledgement:

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#-1656

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RADIOGRAPHIC EXAMINATION REPORT

Page 1 of 1

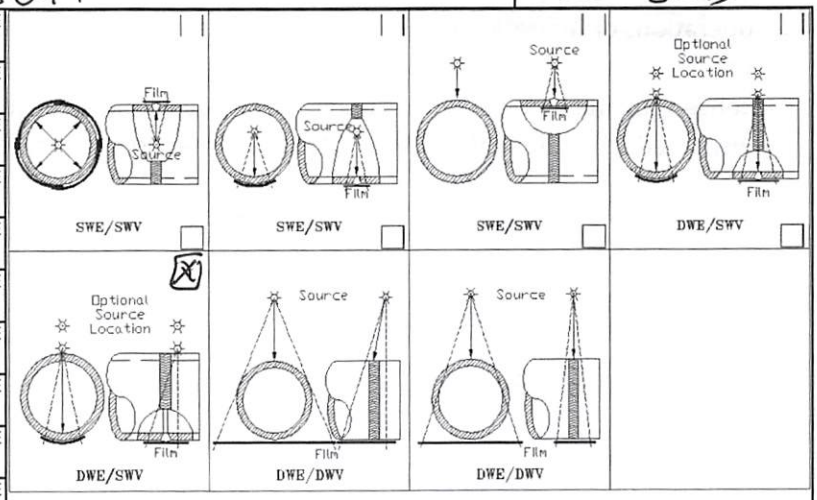
SC# _____

CUSTOMER/CONTACT PFI | DATE 3-14-18

LOCATION/ADDRESS LA MARQUE

UNIT/SYSTEM 3917C-B-B-C SB16049 | P.O. Job # 2293

	A	B	C	D	E
MATERIAL	C/S				
THICKNESS	.375				
DIAMETER	30"				
REINF. THICKNESS	—				
SFD	14.5				
EXPOSURE TIME	4m30s				
IQI SIZE/MATERIAL	B				
IQI LOCATION (S/F)	F				
SHIM THK & MAT'L	—				
# OF EXPOSURES	3				
MARKERS: NBR OR SPACING					



SOURCE	Ci	kV	Ma	FOCAL SPOT	SCREENS	FILM LOADING	FILM PROCESS
☒ Ir	45			.10x.11	FRONT .005	☒ Single ☐ Double	TIME 4m10
☐ Co					REAR .005		TEMP 69°
☐ X-Ray							☐ AUTO ☒ MANUAL

NDE PROCEDURE: BI-RT-300-Rev 0 | ACCEPTANCE STANDARD: API-1104 | SURFACE CONDITION: AS WELDED

STAGE OF MANUFACTURE: ☐ INTERMEDIATE ☐ FINAL ☐ REPAIR ☐ BEFORE PWHT ☐ AFTER PWHT

C - CRACK; CP - CLUSTER POROSITY; IP - INSUFFICIENT PENETRATION; EU - EXTERNAL UNDERCUT; SU - SURFACE
SL - SLAG; P - POROSITY/GAS POCKET; IF - INSUFFICIENT FUSION; IU - INTERNAL UNDERCUT; HL - IP DUE TO HIGH/LOW
T - TUNGSTEN; HB - HOLLOW BEAD; EP - EXCESSIVE PENETRATION; IC - INTERNAL CONCAVITY; BT - BURN THROUGH

WELD	VIEW	DENSITY PEN	DENSITY WIELD	ACC	REJ	LIST INDICATIONS	WELDER ID - OTHER ID - REMARKS
W-25R	4-5	2.0	4.0	☑	☐		(X)
		↓	↓	☐	☐		
W-26R	2-3	↓	↓	☑	☐		(X)
	3-4	2.0	4.0	☑	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		
				☐	☐		

☐ ADDITIONAL PAGES COMMENTS:

OF FILM AND SIZE: ~~2~~ (3) 4.5x17 | FILM BRAND/TYPE: AGFA D83 | TOTAL # OF WELDS: 2

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
3-14-18		Yes ☐ No ☒	1656	11	2

Travel if Applicable: Hours: ____ Miles Total: ____ | Airlines ☐ Vehicle ☐ | Hours: Worked 1p to 3p AM and ____ to ____ PM | Total Hrs 2

AARON MARTELLI

Signature of Customer's Representative certifies time and material correct | Aaron Martelli LVL II | KORY TAYLOR | Assistant

Name, Signature, and Level of Examiner

Customer signature indicates satisfactory performance and agreement with time, material, equipment and costs associated with this project. An invoice will be submitted reflecting the current rates on file.

RT-BI-001

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Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2531

DATE 03/15/2018 **TERMS** Net 30

DUE DATE 04/14/2018

PURCHASE ORDER
2293-4735

ACTIVITY	QTY	RATE	AMOUNT
Project Personnel:Personnel:QA/QC Technician ST @ La Marque Shop 3/8/18	2	75.00	150.00
Project Personnel:Personnel:QA/QC Technician ST @ La Marque Shop 3/9/18	8	75.00	600.00
Project Personnel:Personnel:QA/QC Technician OT @ La Marque Shop 3/9/18	2	112.50	225.00
Project Personnel:Personnel:QA/QC Technician ST @ La Marque Shop 3/12/18	8	75.00	600.00
Project Personnel:Personnel:QA/QC Technician OT @ La Marque Shop 3/12/18	2	112.50	225.00
Project Personnel:Personnel:QA/QC Technician ST @ La Marque Shop 3/13/18	8	75.00	600.00
Project Personnel:Personnel:QA/QC Technician OT @ La Marque Shop 3/13/18	2.50	112.50	281.25
Project Personnel:Personnel:QA/QC Technician ST @ La Marque Shop 3/14/18	3	75.00	225.00
Project Personnel:Personnel:QA/QC Technician ST @ La Marque Shop 3/15/18	3	75.00	225.00

TOTAL DUE **$3,131.25**

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Page 1 of 1

SC# N/A

CUSTOMER/CONTACT PARAGON / R. COOPER

DATE 8 MARCH 2018

LOCATION/ADDRESS 500 MAIN ST LAMARQUE TX 77568

UNIT/SYSTEM N/A

P.O. 2293-4735

QA/QC CONSULTING

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
8/MAR/2018	R. COOPER	Yes ☐ No ☑	N/A	N/A	2293

Travel if Applicable Hours:	Miles Total	Airlines ☐ Vehicle ☐	Hours: Worked	to 3 ~~PM and~~ to 5 PM	Total Hours 2 HRS

Signature of Customer's Representative certifies time and material correct

HAL WALLING CWI/API — Name, Signature, and Level of Examiner

N/A — Assistant

Customer signature indicates satisfactory performance & agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file

GR-BI-001

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Page 1 of 1

SC# N/A

CUSTOMER/CONTACT PARAGON / R. COOPER

DATE 9 MARCH 2018

LOCATION/ADDRESS 500 MAIN ST LA MARQUE TX 77568

UNIT/SYSTEM N/A

P.O. 2293-4735

QA/QC CONSULTING

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
9 MAR 2018	R COOPER	Yes ☐ No ☑	N/A	N/A	2293

Travel if Applicable Hours:	Miles Total	Airlines ☐ Vehicle ☐	Hours: Worked 7 to AM ~~and~~ to 5:30 PM	Total Hours 10

Signature of Customer's Representative certifies time and material correct

HAL WALLING CWI/API — Name, Signature, and Level of Examiner

N/A — Assistant

Customer signature indicates satisfactory performance & agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file

GR-BI-001

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Page 1 of 1

SC# N/A

CUSTOMER/CONTACT PARAGON / R. COOPER

DATE 12/MARCH/2018

LOCATION/ADDRESS 500 MAIN ST. LAMARQUE TX 77568

UNIT/SYSTEM N/A

P.O. 2293-4735

QA/QC CONSULTING

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
12 MAR 2018	R. COOPER	Yes ☐ No ☑	N/A	N/A	2293

Travel if Applicable Hours:	Miles Total	Airlines	Vehicle	Hours: Worked					Total Hours
	N/A	☐	☑ N/A	7	to	AM ~~and~~	5:30	PM	10

Signature of Customer's Representative certifies time and material correct

HAL WALLING CWI/API — Name, Signature, and Level of Examiner

N/A — Assistant

Customer signature indicates satisfactory performance & agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file

GR-BI-001

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Page 1 of 1

SC# N/A

CUSTOMER/CONTACT PARAGON / R. COOPER | DATE 13 MARCH 2018

LOCATION/ADDRESS 500 MAIN ST LAMARQUE TX 77568

UNIT/SYSTEM N/A | P.O. 2293-4735

QA/QC CONSULTING

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
13 MAR 2018	R. COOPER	Yes ☐ No ☑	N/A	N/A	2293

Travel if Applicable Hours:	Miles Total	Airlines	Vehicle	Hours: Worked	to	AM and	to	PM	Total Hours
	N/A		N/A	7			6		10.5

Signature of Customer's Representative certifies time and material correct

HAL WALLING CWI/API — Name, Signature, and Level of Examiner

N/A — Assistant

Customer signature indicates satisfactory performance & agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file

GR-BI-001

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Page 1 of 1

SC# N/A

CUSTOMER/CONTACT PARAGON / R. COOPER | DATE 14 MARCH 2018

LOCATION/ADDRESS 500 MAIN ST LAMARQUE TX 77568

UNIT/SYSTEM N/A | P.O 2293-4735

QA / QC CONSULTING

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
14 MAR 2018	R. COOPER	Yes ☐ No ☑	N/A	N/A	2293

Travel if Applicable Hours:	Miles Total	Airlines ☐ Vehicle ☒	Hours: Worked					Total Hours
N/A	N/A	N/A	7	to	AM and	10	PM	3

Signature of Customer's Representative certifies time and material correct

HAL WALLING CWI / API — Name, Signature, and Level of Examiner

N/A — Assistant

Customer signature indicates satisfactory performance & agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file

GR-BI-001

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Page 1 of 1

SC# N/A

CUSTOMER/CONTACT PARAGON / R. COOPER

DATE 15 MARCH 2018

LOCATION/ADDRESS 500 MAIN ST. LAMARQUE TX 77568

UNIT/SYSTEM N/A

P.O. 2293-4735

QA/QC CONSULTING

Date	Customer Contact	Per Diem	Report #	Unit #	No. on Job
15 MAR. 18	R. COOPEN	Yes ☐ No ☒	N/A	N/A	2293

Travel if Applicable Hours:	Miles Total	Airlines ☐ Vehicle ☒	Hours: Worked				Total Hours
	N/A	N/A	~~to~~ 7	AM and	to 10	PM	3

Signature of Customer's Representative certifies time and material correct

HAL WALLING N/A

Name, Signature, and Level of Examiner — Assistant

CWI/API

Customer signature indicates satisfactory performance & agreement with time, materials, equipment and cost associated with this project. An invoice will be submitted reflecting the current rates on file

GR-BI-001

Blazer Inspection, Inc.
2602 Texas Ave.
Texas City, TX 77590 US
409-948-1012
jspruiell@blazerinspection.com
www.blazerinspection.com

BILL TO
Paragon Fab, Inc.
500 Main
La Marque, Tx 77568

INVOICE 2532

DATE 03/15/2018 **TERMS** Net 30

DUE DATE 04/14/2018

PURCHASE ORDER
Welder Testing

ACTIVITY	QTY	RATE	AMOUNT
Welder Testing:2" CS Pipe Test Up To XX James Billiot - 2/28/2018	1	160.00	160.00
Welder Testing:12" 1104 Butt Test James Billiot - 2/28/18	1	375.00	375.00
Welder Testing:2" CS Pipe Test Up To XX Eric Cousin - 2/28/18	1	160.00	160.00
Welder Testing:12" 1104 Butt Test Eric Cousin - 2/28/18	1	375.00	375.00
Welder Testing:2" CS Pipe Test Up To XX James Cloyed - 2/28/18	1	160.00	160.00
Welder Testing:Plate Test Coupon 3/8" James Cloyed - 2/28/18	1	14.00	14.00
Welder Testing:12" 1104 Butt Test Daniel Fletcher - 3/1/18	1	375.00	375.00
Welder Testing:Plate Test Coupon 3/8" Daniel Fletcher - 3/1/18	1	14.00	14.00
Welder Testing:12" 1104 Butt Test Fernando Garza - 3/1/18	1	375.00	375.00
Welder Testing:Plate Test Coupon 3/8" Fernando Garza - 3/1/18	1	14.00	14.00
Welder Testing:2" CS Pipe Test Up To XX Fernando Garza - 3/1/18	1	160.00	160.00
Welder Testing:2" CS Pipe Test Up To XX Kobe Webber - 3/1/18	1	160.00	160.00
Welder Testing:Plate Test Coupon 3/8" Kobe Webber - 3/1/18	1	14.00	14.00
Welder Testing:12" 1104 Butt Test Kobe Webber - 3/1/18	1	375.00	375.00

ACTIVITY	QTY	RATE	AMOUNT
Welder Testing:12" 1104 Butt Test Justin Cross - 3/1/18	1	375.00	375.00
Welder Testing:Plate Test Coupon 3/8" Justin Cross - 3/1/18	2	14.00	28.00
Welder Testing:12" 1104 Butt Test Justin Cross 2nd Try - 3/1/18	1	375.00	375.00
Welder Testing:2" CS Pipe Test Up To XX Justin Cross - 3/2/18	1	160.00	160.00
Welder Testing:12" 1104 Butt Test Fernando Garza 2nd Try - 3/2/18	1	375.00	375.00
Welder Testing:2" CS Pipe Test Up To XX Jason Moore - 3/2/18	1	160.00	160.00
Welder Testing:12" 1104 Butt Test Jason Moore - 3/2/18	1	375.00	375.00
Welder Testing:Plate Test Coupon 3/8" Jason Moore - 3/2/18	1	14.00	14.00
Welder Testing:12" 1104 Butt Test Jason Moore 2nd Try - 3/3/18	1	375.00	375.00
Welder Testing:2" CS Pipe Test Up To XX Javier Fuentes - 3/3/18	1	160.00	160.00
Welder Testing:12" 1104 Butt Test Javier Fuentes - 3/3/18	1	375.00	375.00
Project Personnel:Personnel:QA/QC Technician OT Weld Monitoring Saturday 3/3/18	10	112.50	1,125.00
Welder Testing:12" 1104 Butt Test Reynaldo Supulveda - 3/10/18	1	375.00	375.00
Welder Testing:2" CS Pipe Test Up To XX Raynaldo Supulveda - 3/10/18	1	160.00	160.00
Project Personnel:Personnel:QA/QC Technician OT Weld Monitoring Saturday 3/10/18	5	112.50	562.50

TOTAL DUE	$7,725.50

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180002**

Welder's Name: James "Pooky" Billiot TDL: 12695480 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .436"

Manual or Semiatuomatic Variables for Each Process (QW-350)	**Actual Values**	**Range Qualified**
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P1, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	2.39"o.d.	1" to unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.229"/.229"	.458"/.458"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type (X) QW-462.2 (Side) Results ( ) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Side 1	Acceptable	Side 4	Acceptable
Side 2	Acceptable		
Side 3	Acceptable		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 28 February 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180005**

Welder's Name: James "Pooky" Billiot TDL# 12695480 Stamp #: X

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .386"

Manual or Semiatuomatic Variables for Each Process (QW-350)	**Actual Values**	**Range Qualified**
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	12.75" o.d.	2.875" to Unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.193"/.193"	.386"/.386"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short Circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type ( ) QW-462.2 (Side) Results (X) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Root 1	Acceptable	Face 2	Acceptable
Root 2	Acceptable		
Face 1	Acceptable		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 28 February 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180003**

Welder's Name: Eric Cousin TDL: 8960533 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .436"

Manual or Semiatuomatic Variables for Each Process (QW-350)	Actual Values	Range Qualified
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P1, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	2.39"o.d.	1" to unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.229"/.229"	.458"/.458"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type (X) QW-462.2 (Side) Results ( ) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Side 1	Acceptable	Side 4	Acceptable
Side 2	Acceptable		
Side 3	Acceptable		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 28 February 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180004**

Welder's Name: Eric Cousin TDL: 8960533 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .386"

Manual or Semiatuomatic Variables for Each Process (QW-350)	**Actual Values**	**Range Qualified**
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	12.75" o.d.	2.875" to Unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.193"/.193"	.386"/.386"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short Circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type ( ) QW-462.2 (Side) Results (X) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Root1	Acceptable	Face 2	Acceptable
Root 2	Acceptable		
Face 1	Acceptable		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 28 February 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180006**

Welder's Name: James Cloyed TDL: 28486543 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .436"

Manual or Semiatuomatic Variables for Each Process (QW-350)	Actual Values	Range Qualified
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	2.39"o.d.	1" to unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.229"/.229"	.458"/.458"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type (X) QW-462.2 (Side) Results ( ) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Side 1	Not done	Side 4	Not done
Side 2	Not done		
Side 3	Not done		

Visual examination results (QW-302.4) Rejected

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 28 February 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180007**

Welder's Name: Danielle Fletcher TDL: 15230045 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .386"

Manual or Semiatuomatic Variables for Each Process (QW-350)	**Actual Values**	**Range Qualified**
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	12.75" o.d.	2.875" to Unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.193"/.193"	.386"/.386"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short Circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type ( ) QW-462.2 (Side) Results (X) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Root 1	Not done	Face 2	Not done
Root 2	Not done		
Face 1	Not done		

Visual examination results (QW-302.4) Rejected, lack of fusion

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 1 March 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180008**

Welder's Name: Fernando Garza TDL: 25017030 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .386"

	Actual Values	Range Qualified
Manual or Semiatuomatic Variables for Each Process (QW-350)		
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	12.75" o.d.	2.875" to Unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.193"/.193"	.386"/.386"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short Circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type ( ) QW-462.2 (Side) Results (X) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Root 1	Not done	Face 2	Not done
Root 2	Not done		
Face 1	Not done		

Visual examination results (QW-302.4) Rejected, lack of fusion

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 1 March 2018 By: _____

Blazer Inspection, Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180009**

Welder's Name: Fernando Garza TDL: 25017030 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .436"

Manual or Semiatuomatic Variables for Each Process (QW-350)	Actual Values	Range Qualified
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ___ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	2.39"o.d.	1" to unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.229"/.229"	.458"/.458"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type (X) QW-462.2 (Side) Results ( ) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Side 1	Acceptable	Side 4	Acceptable
Side 2	Acceptable		
Side 3	Acceptable		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 1 March 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180010**

Welder's Name: Kobe Webber TDL: 36236732 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .436"

Manual or Semiatuomatic Variables for Each Process (QW-350)	**Actual Values**	**Range Qualified**
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	2.39"o.d.	1" to unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.229"/.229"	.458"/.458"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type (X) QW-462.2 (Side) Results ( ) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Side 1	Acceptable	Side 4	Acceptable
Side 2	Acceptable		
Side 3	Acceptable		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 1 March 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180011**

Welder's Name: Koby Webber TDL: 36236732 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .386"

Manual or Semiatuomatic Variables for Each Process (QW-350)	**Actual Values**	**Range Qualified**
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	12.75" o.d.	2.875" to Unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.193"/.193"	.386"/.386"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short Circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type ( ) QW-462.2 (Side) Results (X) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Root 1	Not done	Face 2	Not done
Root 2	Not done		
Face 1	Not done		

Visual examination results (QW-302.4) Rejected, lack of fusion on root

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 1 March 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180013**

Welder's Name: Justin Cross TDL: 27877608 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .386"

Manual or Semiatuomatic Variables for Each Process (QW-350)	Actual Values	Range Qualified
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ___ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	12.75" o.d.	2.875" to Unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.193"/.193"	.386"/.386"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short Circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type ( ) QW-462.2 (Side) Results (X) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Root 1	Not done	Face 2	Not done
Root 2	Not done		
Face 1	Not done		

Visual examination results (QW-302.4) Rejected, lack of fusion on root

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 1 March 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180014**

Welder's Name: Justin Cross TDL: 27877608 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .386"

Manual or Semiatuomatic Variables for Each Process (QW-350)	**Actual Values**	**Range Qualified**
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P1, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	12.75" o.d.	2.875" to Unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.193"/.193"	.386"/.386"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short Circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type ( ) QW-462.2 (Side) Results (X) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Root 1	Not done	Face 2	Not done
Root 2	Not done		
Face 1	Not done		

Visual examination results (QW-302.4) Rejected, lack of fusion on root

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 1 March 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180012**

Welder's Name: Justin Cross TDL: 27877608 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .436"

Manual or Semiatuomatic Variables for Each Process (QW-350)	**Actual Values**	**Range Qualified**
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	2.39"o.d.	1" to unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.229"/.229"	.458"/.458"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type (X) QW-462.2 (Side) Results ( ) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Side 1	Acceptable	Side 4	Rejectable fracture
Side 2	Rejectable fracture		
Side 3	Rejectable fracture		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 2 March 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180015**

Welder's Name: Fernando Garza TDL: 25017030 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .386"

Manual or Semiatuomatic Variables for Each Process (QW-350)	**Actual Values**	**Range Qualified**
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	12.75" o.d.	2.875" to Unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.193"/.193"	.386"/.386"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short Circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type ( ) QW-462.2 (Side) Results (X) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Root 1	Fail Fractured	Face 2	Acceptable
Root 2	Fail Fractured		
Face 1	Acceptable		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 2 March 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180016**

Welder's Name: Jason Moore TDL: 25320854 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .436"

Manual or Semiatuomatic Variables for Each Process (QW-350)	Actual Values	Range Qualified
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	2.39"o.d.	1" to unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.229"/.229"	.458"/.458"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type (X) QW-462.2 (Side) Results ( ) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Side 1	Acceptable	Side 4	Acceptable
Side 2	Acceptable		
Side 3	Acceptable		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 2 March 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180017**

Welder's Name: Jason Moore TDL: 25320854 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .386"

Manual or Semiatuomatic Variables for Each Process (QW-350)	Actual Values	Range Qualified
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	12.75" o.d.	2.875" to Unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.193"/.193"	.386"/.386"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short Circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type ( ) QW-462.2 (Side) Results (X) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Root 1	Rejectable. Fracture	Face 2	Acceptable
Root 2	Rejectable, fracture		
Face 1	Acceptable		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 2 March 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180020**

Welder's Name: Jason Moore TDL: 25320854 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .386"

Manual or Semiatuomatic Variables for Each Process (QW-350)	Actual Values	Range Qualified
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	None/Weld Metal	With or Without/ With
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	12.75" o.d.	2.875" to Unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.193"/.193"	.386"/.386"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short Circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type ( ) QW-462.2 (Side) Results (X) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Root 1	Acceptable	Face 2	Acceptable
Root 2	Acceptable		
Face 1	Acceptable		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 3 March 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180010**

Welder's Name: Javier Fuentes TDL: 6179621 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .436"

Manual or Semiatuomatic Variables for Each Process (QW-350)	**Actual Values**	**Range Qualified**
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	2.39"o.d.	1" to unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.229"/.229"	.458"/.458"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type (X) QW-462.2 (Side) Results ( ) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Side 1	Acceptable	Side 4	Acceptable
Side 2	Acceptable		
Side 3	Acceptable		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 3 March 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180018**

Welder's Name: Javier Fuentes TDL# 6179621 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: GMAW-FCAW 2

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .386"

	Actual Values	Range Qualified
Manual or Semiatuomatic Variables for Each Process (QW-350)		
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	None/Weld Metal	With or Without/ With
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	12.75" o.d.	2.875" to Unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.193"/.193"	.386"/.386"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	Short Circuting	Short Circuting
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type ( ) QW-462.2 (Side) Results (X) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Root 1	Acceptable	Face 2	Acceptable
Root 2	Acceptable		
Face 1	Acceptable		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling AWS SCWI 05110018

Mechanical Tests Conducted By: Hal Walling AWS SCWI 05110018

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Organization: _____

Date: 3 March 2018 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180022**

Welder's Name: Reynaldo Supulveda TDL: 2671454 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: 1 GM, GT, FC 93

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .375"

Manual or Semiatuomatic Variables for Each Process (QW-350)	Actual Values	Range Qualified
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	None/Weld Metal	With or Without/ With
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	12.75" o.d.	2.875" to Unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.1875"/.1875"	.375"/.375"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	S.C./Spray	S.C./Spray
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type ( ) QW-462.2 (Side) Results (X) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Root 1	Acceptable	Face 2	Acceptable
Root 2	Acceptable		
Face 1	Acceptable		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling

Mechanical Tests Conducted By: Hal Walling

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 10-Mar-18 By: _____

Blazer Inspection Inc. **Welder Performance Qualification**

2602 Texas Ave. Texas City, Texas **Test # 180023**

Welder's Name: Reynaldo Supulveda TDL: 2671454 Stamp #: Unknown

Welding Process(es) Utilized: GMAW and FCAW Type: Semniautomatic

Welding Procedure Identification # Utlized by Welder for Qualification: I GM, GT, FC 93

Base Material(s) Welded: SA-106 gr. B to SA-106 gr. B Thickness: .436"

Manual or Semiatuomatic Variables for Each Process (QW-350)	Actual Values	Range Qualified
Backing (metal, weld metal, welded from both sides, flux, etc. (QW-402)	none/weld metal	with or without/with
ASME P-No. ____ P1 to ASME P-No. (QW-403)	P1 to P1	P1-P11, 34, 4X
( ) Plate X Pipe (enter diameter if pipe)	2.375"o.d.	1" to unlimited
Filler metal specification (SFA): ER70S6/E71T1 Classification (QW-404)	ER70S6/E71T1	ER70S6/E71T1
Filler metal F- No.:	6/6	All F6
Consumable insert for GTAW or PAW:	N/A	N/A
Weld deposit thickness for each welding process	.218"/.218"	.436"/.436"
Welding position (1G, 5G, etc.) (QW-405)	6G	All
Welding progression (uphill/downhill)	Down and Up/Up	Down and Up/Up
Backing gas fro GTAW, PAW, or GMAW; fuel gas for OFW (QW-408)	None	With or Without
GMAW transfer mode (QW-409)	S.C./Spray	S.C./Spray
GTAW welding current type/polarity	N/A	N/A
Machine Welding Variable for the Process Used (QW-360)		
Direct / remote visual control	N/A	N/A
Automatic voltage control (GTAW)	N/A	N/A
Automatic joint tracking	N/A	N/A
Welding position (1G, 5G, etc.)	N/A	N/A
Consumable insert	N/A	N/A
Backing (metal, weld metal, welded from both sides, flux, etc.)	N/A	N/A

Guided Bend Test Results

Guided Bend Tests Type (X) QW-462.2 (Side) Results ( ) QW-462.3a. (Trans. R&F) Type ( ) QW-462.3b (Long, R&F) Results

Side 1	Acceptable	Side 4	Acceptable
Side 2	Acceptable		
Side 3	Acceptable		

Visual examination results (QW-302.4) Acceptable

Radiographic test results (QW-304 and QW-305) N/A

(For alternative qualification of groove welds by radiography) N/A

Fillet Weld - Facture test N/A Length & percent of defects N/A in.

Macro Test Fusion N/A Fillet leg size N/A in.

Welding Test Conducted By: Hal Walling

Mechanical Tests Conducted By: Hal Walling

We certify that the statements in this record are correct and that the test coupons were prepared, welded, and tested in accordance with requirements of Section IX of the ASME Code.

Organization: _____

Date: 10-Mar-18 By: _____